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für akkreditierung
und qualitätssicherung

agence suisse
d'accréditation et
d'assurance qualité

agenzia svizzera di
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swiss agency of
accreditation and
quality assurance

Accreditation pursuant to HEdA and MedPA Human Medicine, University of Fribourg

External evaluation report | 17 December 2021



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Part A

Decision of the Swiss Accreditation Council

17 December 2021



Décision
du Conseil suisse d'accréditation

**Accréditation de la filière d'études en médecine humaine
de l'Université de Fribourg**

I. Sources juridiques

Loi fédérale du 30 septembre 2011 sur l'encouragement des hautes écoles et la coordination dans le domaine suisse des hautes écoles (loi sur l'encouragement et la coordination des hautes écoles, LEHE), RS 414.20;

Loi fédérale du 23 juin 2006 sur les professions médicales universitaires (loi sur les professions médicales, LPMéd), RS 811.11;

Ordonnance du Conseil des hautes écoles du 28 mai 2015 pour l'accréditation dans le domaine des hautes écoles (ordonnance d'accréditation LEHE), RS 414.205.3;

Règlement du 12 mars 2015 relatif à l'organisation du Conseil suisse d'accréditation (OReg-CSA).

II. Faits

L'Université de Fribourg a adressé à l'Agence suisse d'accréditation et d'assurance qualité (AAQ) une demande d'accréditation selon la LEHE et la LPMéd pour sa filière d'études en médecine humaine, datée du 18 juin 2020.

Après en avoir informé le Conseil suisse d'accréditation, l'AAQ a tenu, avec la Section de médecine de la Faculté des sciences et de médecine de l'Université de Fribourg proposant la filière d'études, la séance d'ouverture de la procédure le 28 septembre 2020.

La Section de médecine de la Faculté des sciences et de médecine de l'Université de Fribourg a remis le 3 mai 2021 son rapport d'auto-évaluation à l'AAQ.

Sur la base du rapport d'auto-évaluation et de la visite sur place ayant eu lieu auprès de la Section de médecine de la Faculté des sciences et de médecine de l'Université de Fribourg du 23 juin 2021 au 24 juin 2021, le groupe d'experts mandaté et constitué par l'AAQ a vérifié si les standards de qualité découlant de la LEHE et la LPMéd étaient respectés et a rédigé un rapport visant à rendre compte de

cette vérification (rapport du groupe d'experts et proposition d'accréditation de l'AAQ datés du 23 août 2021).

La Section de médecine de la Faculté des sciences et de médecine de l'Université de Fribourg a pris position le 28 septembre 2021 sur le rapport du groupe d'experts et sur la proposition d'accréditation de l'AAQ datés du 23 août 2021.

La Commission extraparlamentaire des professions médicales (MEBEKO) a pris position le 11 novembre 2021 sur le rapport du groupe d'experts et sur la proposition d'accréditation de l'AAQ datés du 28 septembre 2021 (rapport du groupe d'experts daté du 28 septembre 2021 – section C du rapport d'évaluation externe).

Par son courrier daté du 14 octobre 2021, l'AAQ a adressé au Conseil d'accréditation le rapport des experts et sa propre proposition d'accréditation.

Le 2 décembre 2021, l'AAQ a confirmé au Conseil d'accréditation le français comme langue de procédure choisie par la Section de médecine de la Faculté des sciences et de médecine de l'Université de Fribourg.

III. Considérants

1. *Évaluation du groupe d'experts*

Sur la base de l'analyse de l'ensemble des standards visés par la LEHE et la LPMéd, le groupe d'experts a établi dans son rapport un bilan entièrement positif pour la filière d'études faisant l'objet de la procédure d'accréditation.

Le groupe d'experts indique notamment que les recommandations de la dernière procédure d'accréditation ont été prises en compte pour améliorer l'organisation de la Section de médecine au sein de la Faculté des sciences et de médecine.

Le groupe d'experts souligne que le programme d'études du Bachelor en médecine (BMéd) constitue une base solide et bien établie qui comprend tous les aspects nécessaires pour bien préparer les étudiants à leur Master en médecine (MMéd) à l'Université de Fribourg et dans d'autres universités en Suisse. Selon le groupe d'experts, le MMéd est un nouveau programme et, en tant que tel, peut être considéré comme un «travail en cours». Cependant, les experts ont trouvé qu'il était très bien positionné. Au point de vue de l'ensemble, le groupe d'experts formule dix recommandations et propose l'accréditation sans condition. L'une des recommandations porte sur la mise en œuvre du référentiel PROFILES. En effet, si le MMéd est basé sur PROFILES et sept objectifs fixés par le Canton de Fribourg, la mise en œuvre de ce référentiel est toujours en cours pour le BMéd. Le groupe d'experts recommande à ce propos la mise en œuvre de PROFILES pour l'ensemble du programme d'études.

2. *Prise de position de la Section de médecine de la Faculté des sciences et de médecine de l'Université de Fribourg*

Le 28 septembre 2021, la Section de médecine de la Faculté des sciences et de médecine de l'Université de Fribourg a pris position sur le rapport du groupe d'experts et sur la proposition d'accréditation à l'intention du Conseil d'accréditation. Dans sa prise de position, la Section de médecine de la Faculté des sciences et de médecine de l'Université de Fribourg remercie le groupe d'experts pour son évaluation qu'elle perçoit comme constructive, juste et objective. Par ailleurs, elle exprime sa position sur les dix recommandations du groupe d'experts.

3. *Proposition d'accréditation de l'AAQ*

Par son courrier daté du 14 octobre 2021, l'AAQ a transmis au Conseil d'accréditation le rapport d'évaluation externe relatif à la procédure d'accréditation de la filière d'études. La section B du rapport d'évaluation externe (p. 4 – 5) contient la proposition d'accréditation de l'AAQ.

L'AAQ indique que le groupe d'experts a analysé et évalué de façon exhaustive tous les standards et estime que les explications et l'évaluation du groupe d'experts sont cohérentes et consistantes.

Elle estime que l'analyse démontre l'inexistence de faiblesse substantielle tout en délivrant des recommandations visant à pérenniser la filière d'études.

En tenant compte:

- du rapport d'auto-évaluation de la filière d'études;
- du rapport du groupe d'experts;
- de la prise de position de de la filière d'études;

l'AAQ propose de prononcer l'accréditation de la filière d'études sans condition.

4. *Prise de position de la MEBEKO*

Dans sa prise de position du 11 novembre 2021, la MEBEKO, section formation universitaire, a constaté que la procédure d'accréditation de la filière d'études en médecine humaine de l'Université de Fribourg a été menée conformément aux bases légales et aux standards en vigueur. Par ailleurs, elle a indiqué avoir pris connaissance du rapport d'évaluation externe et soutenir la proposition du groupe d'experts d'accréditer la filière d'études en médecine humaine de l'Université de Fribourg sans condition.

5. *Appréciation du Conseil suisse d'accréditation*

Le rapport du groupe d'experts permet au Conseil d'accréditation de prendre une décision.

Sur la base de la proposition d'accréditation du groupe d'experts et de l'AAQ, il est raisonnable d'admettre que la filière d'études présente un degré de conformité suffisant aux standards définis par la LEHE et la LPMéd pour prononcer une accréditation sans condition.

IV. Décision

Vu ce qui précède, le Conseil suisse d'accréditation décide:

1. La filière d'études en médecine humaine de l'Université de Fribourg est accréditée sans condition.
2. La décision d'accréditation est valable pendant sept ans à compter de la date de la présente décision d'accréditation, soit jusqu'au 16 décembre 2028.
3. L'information relative à l'accréditation est publiée sous forme électronique sur www.akkreditierungsrat.ch.
4. La Section de médecine de la Faculté des sciences et de médecine de l'Université de Fribourg de l'Université de Fribourg reçoit un certificat (en deux exemplaires), attestant que sa filière d'études en médecine humaine est accréditée pour une durée de sept ans selon les dispositions légales en vigueur.
5. La Section de médecine de la Faculté des sciences et de médecine de l'Université de Fribourg de l'Université de Fribourg obtient le droit d'utiliser le sceau «Filière d'études accréditée selon la LEHE & LPMéd pour 2021-2028» pour sa filière d'études en médecine humaine.

Berne, le 17 décembre 2021

Pour le Conseil suisse d'accréditation



Pr Dr Jean-Marc Rapp, Président

Voies de recours

La présente décision peut faire l'objet d'un recours, dans les trente jours à compter de sa notification, auprès du Tribunal administratif fédéral, case postale, 9023 Saint-Gall.



Part B

Accreditation pursuant to HEdA and MedPA and accreditation proposal of the AAQ

28 September 2021



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1 Legal principles, objective and object of accreditation

Medical training is regulated by the Medical Professions Act (MedPA). In order for a study programme to lead to a Swiss federal diploma (Art. 24 MedPA), it must be accredited in accordance with Article 31 Higher Education Act (HEdA). Upon registration for the federal exam, candidates must produce evidence of accreditation for the completed study programme. Accreditation in the university medical professions is carried out within the framework of programme accreditation pursuant to HEdA, whereby the HEdA quality standards are supplemented by the MedPA quality standards.

HEdA and MedPA differ in terms of the object of accreditation. HEdA focuses on Bologna-compliant programmes of study; i.e. bachelor's and master's degrees are considered individually. MedPA focuses on the six-year training for a medical profession pursuant to Art. 2 MedPA; i.e. study programmes pursuant to MedPA. As MedPA insists on the accreditation of university medical training courses, the term 'study programme' is used in the following sections.

As a prerequisite for accreditation, the MedPA stipulates that graduates of the study programme must attain all of the objectives set out by MedPA and thus qualify for postgraduate education (Art. 24 (1) MedPA). All the objectives – i.e. the general objectives, the objectives specific to the profession and the qualification for postgraduate education – cannot be assumed to have been attained until the six-year training course has been completed. It is not possible within the framework of accreditation to extrapolate sub-objectives for, for example, the first three years (bachelor's programme) from the criteria for accreditation pursuant to MedPA. Programme accreditation pursuant to HEdA and MedPA covers the entire six-year training course leading to a Swiss federal diploma (Art. 23 (1) MedPA) (study programme as defined by MedPA).

The object of the accreditation procedure is the combination of bachelor's and master's programmes within the framework of which the training for a medical profession pursuant to Article 2 MedPA is carried out. The starting point for accreditation is the respective master's programme of the university that awards the title. As part of the accreditation procedure (self-evaluation of the quality standards in the self-assessment report), the university awarding the title must explain how it ensures that students meet the criteria for admission at the beginning of a study programme (i.e. duly qualified bachelor's degree holders) under the terms of Article 24 (1) MedPA.

2 Procedure

This procedure has been conducted in order to prepare for the accreditation of the study programme in human medicine at the University of Fribourg.

2.1 Expert panel

In a first step, the AAQ agreed on a profile of the expert group with the Section of Medicine within the Faculty of Science and Medicine of the University of Fribourg for the selection of the expert group. Based on this profile, a so-called longlist of possible reviewers was created. The longlist was approved by the AAQ Commission on 18 December 2020. From this longlist, the AAQ compiled the following expert group and informed the University of Fribourg about it in an e-mail dated 1 February 2021 (in alphabetical order):

- Jann Bangerter, master student, human medicine, University of Bern
- Dr. med. Stefan Gysin, PhD, manager of the study programme in human medicine, Department of Health Sciences and Medicine, University of Lucerne
- Univ.-Prof. Dr. med. Sarah König, MME, Professor (W3) and chair “Institute of Medical Teaching and Medical Education Research”, University Hospital Würzburg, Dean of Study Affairs, Faculty of Medicine, Julius Maximilian University of Würzburg, (peer leader)
- Prof. Dr. med. Johanna Sommer, Director of Primary Care Unit, Faculty of Medicine, , University of Geneva

2.2 Calendar

The timetable was determined in consultation with the Section of Medicine within the Faculty of Science and Medicine of the University of Fribourg:

4 August 2020	Date of admission
28 September 2020	Kick-off meeting
11 November 2020	Meeting to plan the on-site visit
3 May 2021	Closing date self-assessment report
23–24 June 2021	On-site visit
23 August 2021	First version of the experts' report and the accreditation proposal of the AAQ
28 September 2021	Statement of the Section of Medicine of the Faculty of Science and Medicine of the University of Fribourg
28 September 2021	Final version of the experts' report and the accreditation proposal of the AAQ
11 November 2021	Hearing of the Commission for Medical Professions
17 December 2021	Decision by the Swiss Accreditation Council
19 April 2022	Publication of the external evaluation report (website AAQ)

2.3 Self-assessment report

The Section of Medicine of the Faculty of Science and Medicine of the University of Fribourg submitted its self-assessment report to the AAQ on 3 May 2021, as agreed.

The self-study process was organised by the Dean of the Faculty of Science and Medicine who appointed two committees, the Steering Committee and the Self-study Committee (Task force), and a project team (Board). Members of the Steering Committee were the Dean of the Faculty, the Chairwoman of the Section of Medicine, the Faculty's administrator, the University Academic Director and members of the board. The Board members were the chair of the MMed Curriculum Committee and vice-chair of education of the Section, the chair of the BMed Curriculum Committee and the Accreditation Project Manager (a position financed by the University of Fribourg). Members of the Self-study Committee included the curriculum managers, professors in BMed and MMed, academic coordinators of the Hôpital fribourgeois (HFR), representatives of the non-professorial academics and teaching staff, students of the BMed and the MMed and members of the Board.

After the kick-off meeting, the Self-study Committee identified key persons for every standard who had the information in order to analyse the compliance of the study programme with the standard. Additionally, the Self-study Committee submitted some quality standards to the student body to include their position in the self-assessment report. After the collection of all the answers, the Board drafted the text and submitted it to the Self-study Committee. In an iterative process, the Self-study Committee revised the draft and forwarded it to the Steering Committee, who validated the report. The self-assessment report was then validated by the Section Council and by the Faculty Council. The University Academic Director who was a member of the Steering Committee informed the rectorate.

The self-assessment report includes a presentation of the University of Fribourg, the Faculty of Science and Medicine and the study programme in human medicine, a description of the self-study process, a follow up on the results of the previous accreditation procedure, an analysis of the quality standards for accreditation of study programmes according to HEdA and MedPA as well as an action plan for the further development of the study programme.

Additionally, the self-assessment report includes the analysis of four standards of the «Basic Medical Education – WFME Global Standards 2015».

In the main body of the self-assessment report, the Section of Medicine analyses its own degree of compliance with the quality standards. It describes the facts of each standard and then draws a conclusion. Based on this, the Section of Medicine has drawn up an action plan with several measures and a timeframe for the further development of the programme and its quality assurance system.

The expert group found that the self-assessment report provides an ideal starting point for the evaluation of the fitting of the study programme with the quality standards. It was comprehensive and carefully written with an extensive number of annexes.

2.4 On-site visit

The on-site visit took place as planned during one and a half days in Fribourg on June 23 and 24 2021. The experts had the opportunity to deepen the findings of the self-assessment report in interviews with all stakeholders of the programme. The atmosphere of the discussions was constructive and open.

Originally, it was planned to conduct the WFME Recognition Programme alongside the on-site visit and the procedure of accreditation of the study programme of human medicine of the University of Fribourg. Due to restrictions in the context of the Covid-19 pandemic, the participation of WFME's expert panel had to be cancelled at the last minute.

The visit was concluded with the so-called debriefing, where the expert group shared its general impression of the study programme in human medicine with representatives of the Section of Medicine, the Rector, the Head of the Quality Assurance service of the University of Fribourg and students in human medicine.

2.5 Expert report

The report of the expert group, which was submitted on time, contains a thorough analysis of the degree of fulfilment of all quality standards. The report was submitted to the Section of Medicine of the Faculty of Science and Medicine of the University of Fribourg together with the accreditation proposition of the AAQ for comments on 23 August 2021.

2.6 Statement of the Section of Medicine of the Faculty of Science and Medicine of the University of Fribourg

The Section of Medicine of the Faculty of Science and Medicine handed in its statement on time on 28 September 2021. In its statement, the Section of Medicine outlines the measures it will take or that are already underway to address the ten recommendations of the expert group.

3 Accreditation proposal of the Swiss Agency of Accreditation and Quality Assurance

Background

“The Bachelor’s Programme in Human Medicine of the University of Fribourg (BMed) exists as such since 2009. Every year, 125 students begin their studies in human medicine. After three years of studies, approximately 120 students successfully complete their BMed and continue their studies either at the University of Basel (25 places reserved), Bern (30 places reserved), Fribourg (40 places) or Zurich (30 places reserved).

The Master’s Programme in Human Medicine of the University of Fribourg (MMed) is a new programme with the first cohort of 40 students who started in autumn 2019. When setting up the curriculum, the current regulations and requirements for study programmes in human medicine in Switzerland based on PROFILES (Principal Relevant Objectives and Framework for Integrated Learning and Education in Switzerland) were used as a foundation and combined with seven goals that were set by the State Council of Fribourg.

The study programme in human medicine is run by the Section of Medicine of the Faculty of Science and Medicine (former Faculty of Science) of the University of Fribourg. The Faculty is responsible for the administration as well as infrastructure, implementation of teaching and the quality assurance. The Faculty delegates the management of teaching and research to the Section of Medicine, according to the tasks defined in the Faculty Statutes.

The study programme is a bilingual curriculum in both French and German. In this context, students are obliged to spend a minimum of two months of their clinical elective year in both the German and the French part of Switzerland.” (part C, p. 1)

The Section of Medicine of the Faculty of Science and Medicine applies for accreditation of the study programme in human medicine for an accreditation period of seven years.

Considerations

The expert group highlights the curriculum of the BMed as a well-established, sound foundation incorporating all necessary aspects to prepare students well for their MMed at the University of Fribourg and other universities in Switzerland. The MMed is a new programme and as such can be regarded as “work in progress”. However, the experts found it to be very well positioned. Overall, the expert group makes ten recommendations and recommends the accreditation unconditionally.

Specifically, the experts emphasise the programmatic assessment with the continuous self-reflection and the learning advisors that lead to a development of soft skills of both students and staff. In combination with the competency-based approach, the expert group sees the MMed to be “highly innovative and future-oriented” (part C, p. 32).

The organisation of the Section of Medicine within the Faculty of Science and Medicine has been changed due to the recommendations of the last accreditation process. The expert group

notes further that quality assurance measures and concepts are in place and developed continuously.

Whilst the implementation of the framework of PROFILES is still under way in the BMed, the MMed is based on PROFILES and seven goals set by the Canton of Fribourg. The expert group recommends implementing PROFILES in the whole study programme.

Moreover, recommendations touch upon the topics of dedicated time for the master thesis, incorporation of the topic of environmental health and medical ethics in the MMed, the continuation of medical humanities in the MMed, student's access to their exam results, feedback for the teachers on the performance of students in exams, additional resources for the bilingual outset of the programme, the definition of requirements for positions, obligatory didactic education courses for teaching staff as well as the exchange between the administrative and teaching staff.

The expert group's analysis takes into account all relevant parts of the quality standards. The expert group's explanations and judgement are consistent and coherent.

Proposal

On the basis of the self-assessment report of the University of Fribourg dated 3 May 2021, the expert report of 23 August 2021, the statement of the University of Fribourg of 23 August 2021 and the above considerations, the Swiss Agency of Accreditation and Quality Assurance (AAQ) proposes that accreditation of the study programme in Human Medicine of the University of Fribourg is granted unconditionally.



Part C
Expert report

28 September 2021





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1 Study programme in human medicine of the University of Fribourg

Portrait

The Bachelor's Programme in Human Medicine of the University of Fribourg (BMed) exists as such since 2009. Every year, 125 students begin their studies in human medicine. After three years of studies, approximately 120 students successfully complete their BMed and continue their studies either at the University of Basel (25 places reserved), Bern (30 places reserved), Fribourg (40 places) or Zurich (30 places reserved).

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The study programme in human medicine is run by the Section of Medicine of the Faculty of Science and Medicine (former Faculty of Science) of the University of Fribourg. The Faculty is responsible for the administration as well as infrastructure, implementation of teaching and the quality assurance. The Faculty delegates the management of teaching and research to the Section of Medicine, according to the tasks defined in the Faculty Statutes.

The study programme is a bilingual curriculum in both French and German. In this context, students are obliged to spend a minimum of two months of their clinical elective year in both the German and the French part of Switzerland.

Structure of the study programme

The study programme has its foundations in a curriculum for year one of the BMed, that was gradually expanded until the full implementation of the BMed in 2009 and the addition of the MMed in 2019. This addition was made "with the aim to promote Family medicine and to generate more general practitioners who would serve the canton of Fribourg" (see p. 2 self-assessment report).

The curriculum for the BMed expands over six semesters of full-time study, comprising three years. The beginning of every study year is in the autumn semester. The curriculum is divided into education units with defined content and learning outcomes that are either based on a discipline or body systems (integrated). ECTS points are accredited to each unit.

BMed Year 1	BMed Year 2	BMed Year 3
Biomedical basics I	Biomedical basics II	Basic clinical sciences
Physics and Chemistry	Practical courses in Anatomy, Biochem., Histolo., Physiology	Clinical skills and Introduction to Family medicine
Introduction to systems		
Systems I	Systems II	Systems III
Scientific thinking and methodology I	Elective courses	
Public health I	Scientific thinking and methodology II	Public health II
Medical humanities I / Med. psychology and sociology I	Medical humanities II / Med. psychology and sociology II	Medical humanities III

The State Council of Fribourg asked the University to carry out a feasibility study for the implementation of a new Master's Programme in Human Medicine in 2014 after different postulates highlighting the fact that doctors particularly in the field of family medicine were missing in Switzerland and in the Canton of Fribourg. The Education, Research and Innovation Message for 2017-2020 also highlighted the lack of doctors in Switzerland and, in order to help solve this matter, included financial kick-off incentives to increase the number of study places in human medicine in Switzerland.

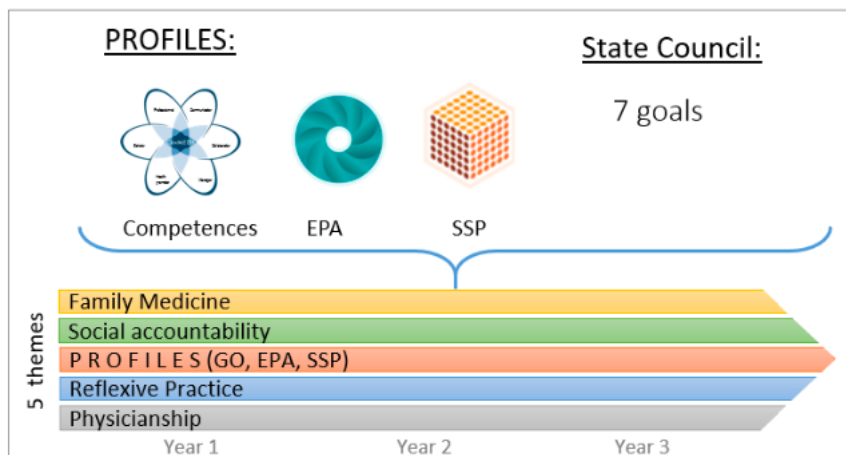
In 2016, the State Council of the Canton of Fribourg decided on the financial credits to create a new Master's Programme in Human Medicine with a focus on family medicine at the University of Fribourg, in collaboration with the HFR.

As outlined in the message of the State Council to the Grand Council, the curriculum of the MMed is based on PROFILES and the following seven goals determined by the State Council of Fribourg:

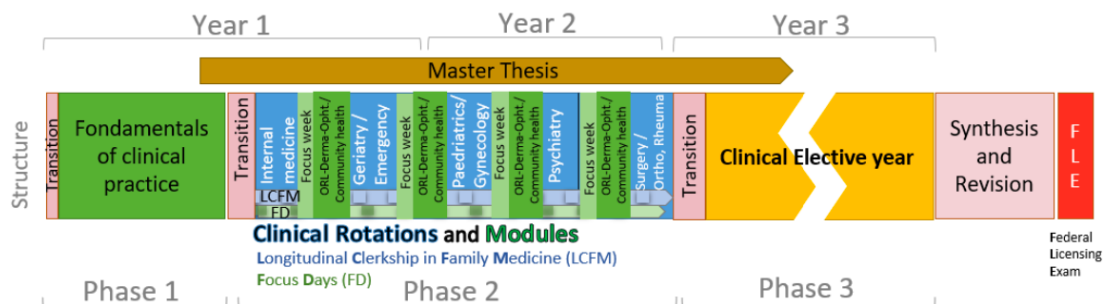
- Encouraging the career choice of “family doctor”
- Putting people's needs at the start of learning
- Fostering the acquisition of strong clinical skills
- Training excellent communicators
- Training in medico-economic and ethical reflection
- Emphasising “evidence-based medicine” and “knowing how to find”.
- Promoting interprofessionality

The message of the State Council to the Grand Council also stated “Thus, while fully respecting the requirements of the Federal Medical Examination, it is possible to design a programme focused on family medicine and to offer a new didactic approach” (see p. 4, self-assessment report).

To operationalise the outset of PROFILES and the seven goals set by the State Council of Fribourg, five themes were defined and then operationalised into eight Competency Domains (see description of standard 1.01 below) that build the framework for the curriculum:



The master's curriculum itself is divided into three phases. Phase one is called "Fundamentals of clinical practice", phase two comprises "Clinical rotations" and phase three the "Elective year". Each phase begins with a so-called transition:



Follow-up on the results of previous procedures

The Bachelor of Medicine was accredited on December 1, 2011 by the Swiss University Conference with conditions for seven years. In order to accredit the whole study programme, the following accreditation process was postponed until 2020-2021.

The conditions treated the structure and functioning of the former Department of Medicine, such as the financial autonomy, strategic planning, management of the bachelor's programme, and infrastructures. The fulfilment of the conditions and the recommendations was implemented in 2012-2015. It was verified and confirmed by the Swiss Accreditation Council in June 2015.

2 Analysis of the conformity of the study programme with the quality standards

1. area: Educational objectives

Standard 1.01:
The study programme has clear objectives, clarifying its special features and complying with national and international requirements.

Description

The study programme has defined objectives for the BMed and for the MMed, respectively.

For the BMed,

- Knowledge and comprehension of important biomedical principles in the basic sciences, including physics, chemistry and biology;
- Knowledge, comprehension and practical skills in the biomedical sciences, including anatomy, biochemistry, biostatistics, histology, immunology and physiology, with emphasis on normal/healthy/physiological mechanisms and processes;
- Knowledge, comprehension and practical skills in clinically oriented biomedical sciences, including microbiology, pathology and pharmacology, with emphasis on pathophysiological and psychopathological principles, processes and mechanisms;
- Comprehension of the psychological and social dimensions of medicine and disease;
- Comprehension of medical ethics, laws and socio-economic principles in medicine and corresponding attitudes, with emphasis on modern societies and the individual role and context of the medical doctor;
- Clinical skills and corresponding attitudes related to patient history, clinical examination, basic diagnostic procedures, introduction to hands-on therapies and basic management of emergency cases;
- Competence of applying the acquired knowledge and skills in the clinical context and considering patient-specific attributes (gender, age, social, cultural and economic background) for recognising and explaining clinical signs and symptoms with the aim of diagnostics and treatment;
- Communicational skills with patients, relatives and health professionals;
- Critical scientific thinking and understanding of the principles in biomedical and clinical research, including relevant methods, scientific literacy and biomedical science communication;
- Knowledge of relevant principles of public health and population health in general and with the focus on Swiss particularities.

For the MMed, the overall aim is to prepare the students for the Federal Licensing Exam and to enable them to have a smooth transition into their post-graduate medical education programme of choice. In order to achieve this, five longitudinal themes were defined that are based on the competency-based framework PROFILES and the seven goals set by the State Council of Fribourg for the new Master's Programme in Human Medicine.

PROFILES is the framework for all study programmes in human medicine in Switzerland. It is divided into three chapters, one describing the roles of the physician by defining seven general objectives:

- **Medical Expert:** As Medical Experts, physicians integrate all of the CanMEDS Roles, applying medical knowledge, clinical skills, and professional values in their provision of high-quality and safe patient-centred care. The Medical Expert is the central physician Role in the CanMEDS Framework and defines the physician's clinical scope of practice.
- **Communicator:** As Communicators, physicians facilitate the doctor-patient relationship and the dynamic exchanges that occur before, during, and after the medical encounter.
- **Collaborator:** As Collaborators, physicians work with patients, families, healthcare teams, other health professionals, and communities to achieve optimal patient care.

- Manager: As Managers, physicians are central to the primary health care team and integral participants in healthcare organisations. They use resources wisely and organise practices which are a resource to their patient population to sustain and improve health, coordinating care within the other members of the healthcare system. Thus, they actively contribute to implementing and maintaining a high-quality healthcare system.
- Health Advocate: As Health Advocates, physicians responsibly use their expertise and influence to advance the health and well-being of individual patients, communities, and populations. They work with those they serve to determine and understand needs, speak on behalf of others when required, and support the mobilisation of resources to effect change.
- Scholar: As Scholars, physicians demonstrate commitment to the continuous improvement of their medical practice, as well as the creation, dissemination, application and translation of evidence-based knowledge.
- Professional: As Professionals, physicians are committed to the health and well-being of individuals and society. They carry out their profession in accordance with current medical standards. Physicians also participate in profession-led regulation and pay attention to the maintenance of personal health.

Furthermore, there are nine entrustable professional activities so-called EPAs, that students must be able to perform under indirect supervision by the end of their studies:

- Take a medical history
- Assess the physical and mental status of the patient
- Prioritise a differential diagnosis following a clinical encounter
- Recommend and interpret diagnostic and screening tests in common situations
- Perform general procedures
- Recognise a patient requiring urgent / emergency care, initiate evaluation and management
- Develop a management plan, discuss orders and prescriptions in common situations
- Document and present a patient's clinical encounter; perform patient handover
- Contribute to a culture of safety and improvement

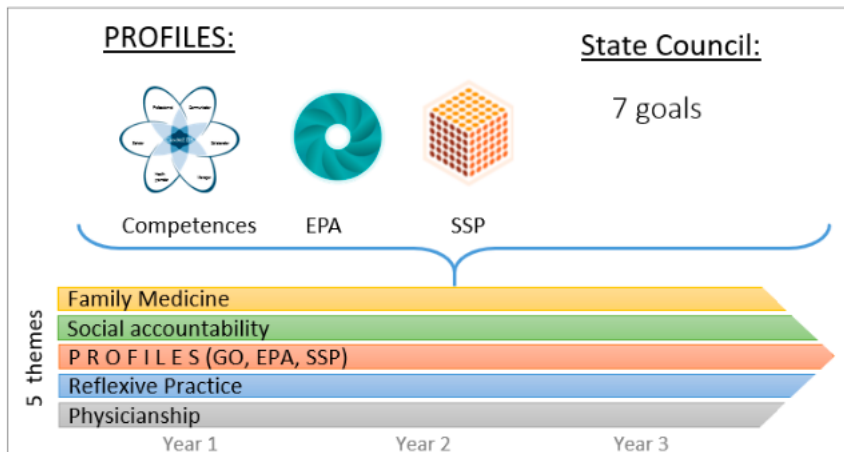
Lastly, PROFILES describes 265 generic situations, so-called situations as starting points (SSPs) that a graduate must be able to manage on day one of his or her residency.

In 2016, when the decision for the new Master's Programme in Human Medicine was taken, the State Council of Fribourg defined the following seven goals for the new master's programme:

- Encouraging the career choice of "family doctor"
- Putting people's needs at the start of learning
- Fostering the acquisition of strong clinical skills
- Training excellent communicators
- Training in medico-economic and ethical reflection

- Emphasising “evidence-based medicine” and “knowing how to find”.
- Promoting interprofessionality

In order to enable a foundation combining the competency-based framework of PROFILES as well as these seven goals, the following five longitudinal themes were defined: family medicine, social accountability, PROFILES, reflexive practice, physicianship.



These five themes have then been operationalised into eight competency domains:

- Medical expertise
- Family medicine
- Physicianship
- Ability to interact and collaborate with other people
- Learning strategies, teaching activities and research
- Community health
- Progress related to Entrustable Professional Activities
- Reflective practice (see self-assessment report, p. 4-5, 10-11)

Analysis

The BMed is a well-established programme that exists as such since 2009 and whose graduates continue their studies at the Universities of Basel, Bern, Zurich and, since 2019, also at the University of Fribourg. Because of this set-up, the BMed has to prepare its students for four Master’s Programmes in Human Medicine that have to use PROFILES but at the same time do not have the exact same curricula. From this, the experts concluded that the objectives defined for the BMed are suitable to empower the students to continue their studies in the MMed of their choice and to pass the Federal Licensing Exam in the end. However, as stated in the self-assessment report, the framework of PROFILES has not yet been fully implemented in the BMed. A corresponding measure is planned with a timeframe from 2022 until 2027. The experts fully support this and make a corresponding recommendation.

The MMed, on the other hand, is a brand-new programme, whose first graduates will take the Federal Licensing Exam in 2022. The MMed uses the framework of PROFILES for its objectives and therefore fully complies with national and international requirements.

According to the self-assessment report, the mapping of the curriculum of the MMed is ongoing, as stated in measure two of the action plan. The expert panel encourages completing the mapping of both BMed and MMed in order to enhance the transparency of the competencies and the learning objectives for both students and teaching staff, and to reinforce the PROFILES-guided linking of basic and biomedical sciences with the clinical context. The expert panel refers to measure three of the action plan: “Revision of the corresponding basic science and biomedical science EUs to reinforce their importance in the science foundation of medicine and put them in a clinical context (vertical integration).”

The expert panel rates quality standard 1.01 as largely fulfilled.

Recommendation 1:

The expert panel recommends implementing PROFILES as a guiding framework for the whole study programme (BMed and MMed).

Standard 1.02:

The study programme pursues educational objectives in line with the mission and strategic planning of the higher education institution or other institution within the higher education sector.

Description and Analysis

In compliance with the University Charter and the Strategy 2030 of the University of Fribourg, the Faculty of Science and Medicine has set out its own mission:

“Mission of the Faculty

We are committed to a high-quality higher education and fundamental research in a wide array of scientific fields. In this way, we wish to bring our contribution to the mission of the University of Fribourg.

We encourage the development of rational, critical and innovative scientific thinking, and we seek to educate experts in diverse scientific fields.

The teaching and supervision we offer our students also aims to contribute to their personal development. The Bachelor, Master, and Doctorate are the tools of this objective and open the doors to a scientific career.

During their studies, our students use German, French, and English. The multilingual nature of the studies improves their communication abilities and their employment prospects.

Our Faculty is part of a national and international network of institutions. Our great independence contributes to the diversity of teaching and research in our country, which are important to take on tomorrow's challenges.

The application of this mission statement is based on regular planning and a long term vision.” (see <https://www.unifr.ch/scimed/en/faculty/profile/mission.html>).

In line with this, the objectives of the BMed cited for standard 1.01 shall prepare and equip students to continue their studies on the Master's level either at the University of Basel, Bern, Fribourg or Zurich.

The MMed with its five longitudinal themes and the eight competency domains, explained in standard 1.01, shall prepare students for the Federal Licensing Exam and for their post-graduate medical education. For this, the curriculum is competency-oriented and students have to reflect their performance repeatedly.

The expert panel rates quality standard 1.02 as completely fulfilled.

Standard 1.03:

The tertiary-level type A institution, if applicable the institutions, regulate the study programme for earning a federal diploma in accordance with the objectives set out in the Medical Professions Act. The responsibility for the quality as well as the accreditation of the study programme lies with the institution that awards the master diploma.

The study programme enables the graduates – at the appropriate level over the course of their university medical education – to:

a) provide comprehensive, individual and high-quality treatment to patients;

Description and Analysis

In the BMed, students learn to understand the human biology of the normal and the healthy individual as well as the basics of somatic and mental pathologies, conditions and diseases. They also acquire knowledge about the basic principles of diagnostic procedures and treatments for the most common diseases. They work intensively on the role of a medical doctor and learn to understand a patient with his or her specific needs in relation to his or her specific social environment.

In the BMed, students acquire the competence of applying the acquired knowledge and skills in the clinical context and considering patient-scientific attributes (gender, age, social, cultural and economic background) for recognising and explaining clinical signs and symptoms with the aim of diagnostics and treatment (see study plan of the bachelor in human medicine, p. 6).

It is planned, however, to introduce more clinical contents earlier in the BMed, starting from year one (more on this under standard 2.04k).

In the MMed, after a first transition, students enter phase one of the MMed which is titled “fundamentals for clinical practice” and includes the modules “from pathophysiology to disease”, “from symptom to diagnostic” and “the life cycle”.

Students start then with their clinical rotations in phase two, in the second semester of year one. All in all, students have 13 months of clinical rotations (phase two) and eleven months of their clerkship year (phase three) where they are in clinical environments (see study plan of the MMed, p. 4f.). Throughout, students reflect on their work and get feedback from peers (more on this under standard 2.07).

In teaching, methods such as problem-based learning are used, which is much appreciated by the students. By this, students are enabled to apply the knowledge acquired in the BMed to provide comprehensive, individual and high-quality treatment to patients.

The expert panel rates quality standard 1.03a as completely fulfilled

Standard 1.03b) address questions with scientifically recognised methods and in consideration of ethical and economic aspects, and make appropriate decisions on that basis;

Description and Analysis

In the BMed, students are enabled to perform critical scientific thinking and to understand the principles in biomedical and clinical research, including relevant methods, scientific literacy and biomedical science communication. Moreover, they acquire comprehension of medical ethics, laws and socio-economic principles in medicine (see study plan of the bachelor in human medicine, p. 6). “Scientific thinking and methodology” is a longitudinal theme throughout the BMed, taught in year one and in year two.

In the MMed, students write their master thesis, which is equivalent to 15 ECTS or ca. 400 hours of work. The master thesis is a personal research work or study, carried out in phase two, under the supervision of a professor from the University of Fribourg or another faculty affiliated with the Hospital of Fribourg (HFR) or the Mental Health Network of Fribourg (RFSM). Students have to hand in a written report and present their findings orally or with a poster. The evaluation is carried out by the professor who has supervised the thesis and by a second expert who was not involved in the supervision.

The expert panel rates quality standard 1.03b as completely fulfilled.

Standard 1.03c) communicate with patients and other involved parties in a professional and direct manner;

Description and Analysis

In the BMed, students acquire communicational skills with patients, relatives and health professionals (see study plan of the bachelor in human medicine, p. 6). In the educational unit “Medical psychology and sociology II” in year two, students learn how important the medical interview is for diagnosis and therapeutic intervention. In order to achieve this, they discuss communication theories and different psychotherapeutic models and have practical communication skills sessions.

The MMed is based on PROFILES, which has as one of its general objectives the role of the physician as a communicator. Furthermore, one of the seven goals stated by the State Council of Fribourg asks for “training excellent communicators”. In transition two, just before the start of the clinical rotations, students “strengthen [their] communicative skills such as the structured summary of a clinical case and patient-centred communication techniques” (study plan of the Master of Medicine, p. 8). Students also acquire communicational skills in the workshops “Breaking bad news and emotion management” and “Motivational interviews”.

The expert panel rates quality standard 1.03c as completely fulfilled.

Standard 1.03d) assume responsibility in the healthcare system, in particular in the field of primary medical care, and in their chosen profession in society;

Description and Analysis

In year three of the BMed, students have an introductory four-day clerkship at a family doctor’s office. More is planned, see standard 2.04k.

In the MMed, students have deep insights in primary medical care by completing their longitudinal clerkships in family medicine that consist of 15 days spent in a general practice near Fribourg over a time span of 10 months, and two months of family medicine in Switzerland during their clerkship year.

At the end of every year in the MMed, students have to write their learning reports that show how the students build their autonomy continuously throughout their studies.

The expert panel rates quality standard 1.03d as completely fulfilled.

Standard 1.03e) perform organisational and management tasks within the context of their profession;

Description and Analysis

In the BMed, students have to write an essay in the educational unit “Medical humanities”, that requires them to organise themselves.

In the MMed, students have to continuously organise their learning process. Students maintain their own e-portfolio where they upload feedbacks and exercises during the clinical rotations and the clerkship year. In the transition two before the clinical rotations, students learn about data handling processes and organisational structures of a hospital. Furthermore, they work on their master thesis in a self-organised matter as there is no dedicated time.

The expert panel rates quality standard 1.03e as completely fulfilled.

Standard 1.03f) respect the competencies of other recognised healthcare professions;

Description and Analysis

In the BMed, students have to do a four-week internship in patient care/nursing that enables them to work with other healthcare professions and to learn about their competencies.

It is planned to have an introduction about other healthcare professionals in the BMed. The expert panel fully supports this measure.

In the educational unit “Language, culture and medicine 2”, which is part of the courses in medical humanities, students have a seminar “What is a doctor? Historical and contemporary reflections” where they have a session on interprofessionalism.

To enable students to learn about, from and with other health professions, there are joint courses for students of pharmacy and human medicine. MMed students have a workshop with pharmacists followed by a one-day immersion in a pharmacy and one day with a health league.

In transition two, students learn about interprofessional communication, together with nursing students.

Where possible, lectures and courses are held by teachers from different disciplines, for example midwifery and medicine.

There is a voluntary project called CoSaMo (Consultation santé Mozaïk), in which students in nursing, osteopathy and medicine have the opportunity on a voluntary basis to practice caring together for other students, while being supervised by professionals from the three health professions.

The expert panel rates quality standard 1.03f as completely fulfilled.

Standard 1.03g) remain competitive on an international level.

Description and Analysis

Students from the BMed either graduate at the Universities of Basel, Bern, Fribourg or Zurich and have shown that they are able to pass the Federal Licensing Exam and then move on to clinical careers, or otherwise.

Students from the MMed will take the Federal Licensing Exam for the first time in 2022. In the expert panel’s opinion, the MMed programme has a progressive didactic programme which is competitive on the international level in the field of medical education. The MMed follows an overall formative “assessment for learning” paradigm which is based on the concept of programmatic assessment and feedback. The design serves as a framework to define multiple points of meaningful information collection (oral and written exams as well as observations within the workplace-based training). An elaborated e-Portfolio serves as a reflection basis for the interaction with the learning advisor to discuss students’ progress and upcoming objectives in the next study period. The overall approach fosters self-directed learning and active reflection of learning which is implemented in the curriculum in a very concise and outstanding matter.

The expert panel rates quality standard 1.03g as completely fulfilled.

2. area: Conception, architecture and structure of the study programme

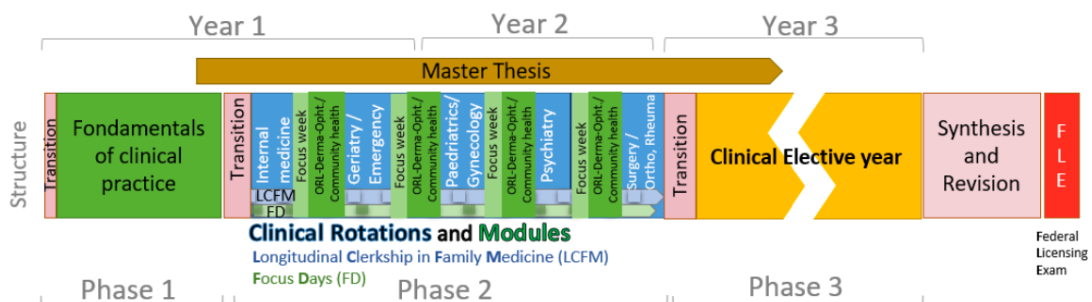
Standard 2.01:
The study programme implements the respective learning objectives in a manner that allows the graduates to attain their educational objectives in accordance with MedPA.

Description and Analysis

The students attain the learning objectives of the BMed described in standard 1.01 as follows. There are several educational units, each dedicated either to a discipline such as physics and chemistry, immunology, microbiology, pharmacology, physiology, radiology. Then there are other educational units that are system-based for example such as Heart and Circulation or Nutrition and Digestion (see p. 19 self-assessment report):

BMed Year 1	BMed Year 2	BMed Year 3
Biomedical basics 1 Cell; Genetics; Information Medical embryology Biomolecules and Metabolism	Biomedical basics 2 Defense and Immunity Molecular medicine	Basic clinical sciences Pathology and Pharmacology Microbiology Radiology Clinical immunology
Physics and Chemistry	Practical courses in Anatomy, Biochem., Histolo., Physiology	Clinical skills
Introduction to systems		Introduction to Family medicine
Systems 1 Locomotion Genital systems Blood; Skin Introd. to medical imagery	Systems 2 Heart and Circulation; Kidney; Respiration; Nutrition and Digestion; Endocrine system; Nervous system & sense organs	Systems 3 Blood; Heart and Circulation; Kidney; Respiration; Digestion and Abdomen; Endocrine system; Locomotion; Nervous system, Mental health; Gynecology and Obstetrics; Pediatrics; Geriatrics
Scientific thinking and methodology I	Elective courses	Public health II
Public health I	Scientific thinking and methodology II	
Medical humanities I	Medical humanities II	Medical humanities III
Medical psychology and sociology I	Medical psychology and sociology II	

The curriculum of the MMed is structured along the eight competency domains presented in standard 1.01: Medical expertise, Family medicine, Physicianship, Ability to interact and collaborate, Learning strategies, Teaching activities and research, Community health, Progress related to Entrustable Professional Activities and lastly Reflective practice. In order to enable students to attain these competencies, the curriculum is structured into three phases:



Phase one is an immersion into the fundamentals of clinical practice, divided into three modules: “From pathophysiology to disease”, “From symptom to diagnostic” and “The life cycle”.

After a so-called week of “Transition”, students enter phase two which consists of the clinical rotations in internal medicine, psychiatry, paediatrics, gynaecology and obstetrics, general surgery, orthopaedics and rheumatology, geriatrics and emergency. This phase also includes the longitudinal clerkship in family medicine and several focus days and weeks dedicated to dermatology/ ophthalmology/ ORL and community health. During phase two, students write their master thesis.

Phase three then consists of the clerkship year or clinical elective year, during which students have to do two months of family medicine in Switzerland, at least two other clinical specialties, at least one continuous clerkship of three months, at least two months in the French-speaking part of Switzerland and two months in the German-speaking part of Switzerland as well as a maximum of five months abroad.

After this, there is the synthesis and revision for the Federal Licensing Exam.

In the MMed, students have the opportunity to deepen a personal interest in a project, ranging from two days to three months. In order to do such a “Project of Excellence”, students have to apply to the MMed Committee presenting a plan.

In the study programme, a variety of teaching methods are used. There are lectures and seminars as well as small group formats for problem-based-learning and laboratory-based formats. Moreover, there are formats like flipped-classroom and case-based discussions.

Students have access, and use several online platforms, such as Moodle, Switchtube, embryology.ch and HistoWeb. In the MMed, students have their own e-portfolio to upload and document their progress and learning activities.

The expert panel rates quality standard 2.01 as completely fulfilled.

Standard 2.02:

Graduates of the study programme must demonstrate the following knowledge, skills and capabilities (adjusted in accordance with MedPA Art. 6):

a) possession of the scientific foundations required to perform preventive, diagnostic, therapeutic, palliative and rehabilitative care;

Description and Analysis

In year one and two of the BMed, students are taught the physicochemical and biological concepts in educational units about physics, chemistry, molecular and cellular biology, genetics, the foundations of biochemistry, general histology and general physiology.

In year three of the BMed, there is a preparatory educational unit about the principles of general pathology and general pharmacology as well as other educational units about medical microbiology.

In phase one, two and three of the MMed, students learn how to use and apply the competences acquired in the BMed.

Aspects of prevention such as illness prevention, health promotion, health equity, addiction, stop smoking and motivational interviewing are the subjects of phase one and of focus weeks in phase two.

Palliative care and rehabilitation are taught in modules one and three of phase one of the MMed, “Neoplastic diseases”, “Health of the elderly” as well as in “Transition 2”, “Transition 3” and during the clinical rotation in geriatrics.

The expert panel rates quality standard 2.02a as completely fulfilled.

Standard 2.02b) an understanding of the principles and methods of scientific research;

Description and Analysis

In the longitudinal education unit “Scientific thinking and methodology” in the BMed, students learn about critical scientific thinking and understanding of the principles in biomedical and clinical research, including relevant methods, scientific literacy and biomedical science communication (see study plan of the Bachelor of Medicine, p. 6).

In the MMed, students write their master thesis during phase two. The master thesis should equal about 400 hours of work and is credited with 15 ECTS. The master thesis is a personal research work or study, carried out under the supervision of a professor from the University of Fribourg or another faculty affiliated with the HFR or the RFSM. Students have to hand in a written report and present their findings orally or with a poster. The evaluation is carried out by the professor who has supervised the thesis and by a second expert who was not involved in the supervision.

From what was said in the interviews during the on-site visit, the experts understand it is not always easy for students to find the time during the clinical rotations, to work on their master thesis. Due to Covid-19, there was a period of time dedicated exclusively to the master thesis for one cohort which students appreciated. The expert panel therefore makes a recommendation to implement a time slot in which students can concentrate on working on their master thesis.

The expert panel rates quality standard 2.02b as largely fulfilled.

Recommendation 2:

The expert panel recommends implementing some time dedicated exclusively to the master thesis in the curriculum of the MMed.

Standard 2.02c) a recognition of the factors needed to maintain good health, the ability to evaluate and consider them in a professional capacity;

Description and Analysis

The longitudinal educational unit “Public Health” in the BMed provides students with knowledge about prevention and health promotion.

As described for standard 2.02a, aspects of prevention such as illness prevention, health promotion, health equity, addiction, stop smoking and motivational interviewing are the subjects of phase one and of focus weeks in phase two in the MMed.

Furthermore, in the educational unit “Community health”, students learn about public health, population health science, prevention, health promotion and health literacy. With the programmatic assessment (more on this under standard 2.07) and its reflective learning reports that students have to write, they learn about being a health advocate.

The expert panel rates quality standard 2.02c as completely fulfilled.

Standard 2.02d) the ability to advise, assist and support patients in cooperation with members of other professions;

Description and Analysis

During the BMed, students do a four-week internship in patient care/nursing. Students have courses together with students of pharmacy, and lectures are given not only by medical doctors but also in cooperation with teachers of other health professions.

Furthermore, there is a voluntary project called CoSaMo (Consultation santé Mozaïk), in which students in nursing, osteopathy and medicine have the opportunity on a voluntary basis to practice caring together for other students, while being supervised by professionals from the three health professions.

The expert panel rates quality standard 2.02d as completely fulfilled.

Standard 2.02e) the ability to analyse medical information and research results and make a critical assessment and application in a professional capacity;

Description and Analysis

Both in the BMed and in the MMed, students learn – among others – in small-group formats that use the method of problem-based learning and case-based discussions.

In the programmatic assessment programme of the MMed, students write an extensive summative learning report about their progress and findings and difficulties every year. During the MMed, students write several formative learning reports and informal feedback through self-evaluation and reflections. When writing their master thesis, students learn how to critically analyse and assess medical information and research results.

The expert panel sees the assessment programme and the writing of the master thesis as a very good preparation for students to analyse medical information and research results, make a clinical assessment and apply this in a professional capacity.

The expert panel rates quality standard 2.02e as completely fulfilled.

Standard 2.02f) the capacity to learn how to work in inter-professional collaboration with members of other professions;

Description and Analysis

During the BMed, students do a four-week internship in patient care/nursing. Students have courses together with students of pharmacy, and lectures are given not only by medical doctors but also in cooperation with teachers of other health professions.

It is planned to have an introduction about other healthcare professionals in the BMed. The expert panel fully supports this measure, as mentioned for standard 1.03f.

To enable students to learn interprofessionally, there are courses for both students of pharmacy and human medicine. MMed students have a workshop with pharmacists followed by a one-day immersion in a pharmacy and one day with a health league.

Moreover, in transition two, students learn about interprofessional communication, together with students in nursing and where possible, lectures and courses are held by teachers from different disciplines, for example midwifery and medicine.

Furthermore, there is a voluntary project called CoSaMo (Consultation santé Mozaïk), in which students in nursing, osteopathy and medicine have the opportunity to practice on a voluntary

basis caring together for other students, while being supervised by professionals from the three health professions.

The expert panel rates quality standard 2.02f as completely fulfilled.

Standard 2.02g) a knowledge of the legal framework of the Swiss social insurance and healthcare systems and ability to apply that knowledge in a professional capacity;

Description and Analysis

In the BMed, students acquire knowledge of relevant principles of public health and population health (see study plan of Bachelor of Human Medicine, p. 6)

As part of the extensive curriculum in medical humanities in the BMed, in the educational unit “Health Management and economics 2”, students attend a lecture about “Management mechanisms of the Swiss healthcare system”.

In the educational unit “Healthcare law”, that is also part of medical humanities, students attend a lecture about “Introduction to healthcare law” (see programme in medical humanities, p. 5, 15, 19).

The expert panel rates quality standard 2.02g as completely fulfilled.

Standard 2.02h) the ability to assess the effectiveness, appropriateness and economic efficiency of their services and conduct themselves accordingly;

Description and Analysis

In the module “Community health” in phase one and two of the MMed, students learn about the economic, legal and political aspects of health and illness. In Transition 2 just before the clinical rotations begin, students attend a workshop in which they learn about the concepts of “Choosing wisely” and “Smarter medicine in Switzerland”.

The expert panel rates quality standard 2.02h as completely fulfilled.

Standard 2.02i) an understanding of the relationship between the national economy and the healthcare system and its various care provision structures;

Description and Analysis

As part of the extensive curriculum in medical humanities in the BMed, in the educational unit “Health Management and economics 1 and 2”, students attend a lecture about “Diagnosing healthcare systems” and “Management mechanisms of the Swiss healthcare system”.

In the educational unit “Healthcare law” that is also part of medical humanities, students attend a lecture about “Introduction to healthcare law” (see programme in medical humanities, p. 5, 15, 19).

The expert panel rates quality standard 2.02i as completely fulfilled.

Standard 2.02j) an ability to apply their knowledge, skills and capabilities in a professional capacity and continuously build upon them.

Description and Analysis

In the MMed, students spend 30 weeks in clinical rotations, 15 days in the longitudinal clerkship in family medicine and eleven months in their electives. During this time, they perform self-evaluation and reflections which are documented in formative and summative learning reports

that allow them to continuously build their knowledge. As reported in the interviews during the on-site visit, students appreciate this way of learning a lot. The expert panel sees this continuous learning as one of the strengths of the curriculum.

The expert panel rates quality standard 2.02j as completely fulfilled.

Standard 2.03:

The study programme supports the development of social competence and students' character with a view to enabling them to meet the requirements of their future profession.

In particular, the study programme prepares students to:

a) recognise and respect the limits of the medical profession as well as their own strengths and weaknesses;

Description and Analysis

In the BMed, students acquire a comprehension of medical ethics, laws and socio-economic principles in medicine and corresponding attitudes, with emphasis on modern societies and the individual role and context of the medical doctor (see study plan of the Bachelor in Human Medicine, p. 6).

In order to achieve this, an extensive curriculum in medical humanities including educational units on "Language, culture & medicine 1, 2 and 3", "History of medicine 1, 2 and 3", "Medical ethics 1, 2 and 3", "Medical anthropology 1 and 2" is set up throughout the entire BMed. In "Language, culture & medicine 2", students attend a seminar "What is a doctor? Historical and contemporary reflections" (see programme in medical humanities, p. 5).

In order to achieve the competence domain eight "Reflective practice" during the MMed, students perform self-evaluation and reflections which are documented in formative and summative learning reports that allow them to continuously build their knowledge. As reported in the interviews during the on-site visit, students appreciate this way of learning a lot. The expert panel sees the continuous learning and reflections as one of the strengths of the curriculum.

The expert panel rates quality standard 2.03a as completely fulfilled.

Standard 2.03b) understand the ethical dimension of their professional conduct and appreciate their responsibility towards individuals, society and the environment;

Description and Analysis

As part of their studies in medical humanities in the BMed, the longitudinal educational unit "Medical ethics 1, 2 and 3" includes courses on "Introduction to the basic principles and concepts of medical ethics", "Applied medical ethics: discussing clinical cases" and "Specific topics in medical ethics". In the educational unit "History of medicine 1, 2 and 3", students learn about the history of the patient, while the lecture and its accompanying seminar "On the history of politics, media and literature relating to infections and epidemics" and the seminars in "Medical anthropology 1 and 2" treat physicians' responsibility towards society (see programme in medical humanities, p. 5, 10, 11, 14, 18, 19).

In the MMed, students attend a focus day and a focus week about "Patients' experiences in clinical high-tech medicine". Also, courses on environmental medicine have been introduced in the MMed.

In the view of the expert panel, environmental health including aspects of global and planetary health will be increasingly important in the future and thus the experts encourage further developing this topic in the curriculum. Furthermore, the strong foundation of ethical aspects

within the medical humanities during the BMed could be taken up in the MMed, e.g. based on (patient) cases, experiences by the students during their clinical rotations and elective year.

The expert panel rates quality standard 2.03b as largely fulfilled.

Recommendation 3:

The expert panel recommends further developing topics of environmental health in the whole curriculum and medical ethics in the MMed.

Standard 2.03c) uphold patients' rights of self-determination in the course of their treatment.

Description and Analysis

In the educational unit "Medical psychology and sociology 1, 2 and 3" in the BMed, students learn how to uphold patients' rights of self-determination in the course of their treatment in the lecture "Autonomy and coercion".

Furthermore, in the programme on medical humanities, students have to write an essay. In year three of the BMed, students have to write an essay about a patient whom they have met during their internship in a general practice. After a preparatory seminar in the first semester of year three, the student then documents the patient's medical history together with the patient, and writes an essay comprising two parts. In the first part, the patient's medical history is described using medical jargon. In the second part, the patient's history is told from the patient's perspective. The principle of this essay is a "radical change of perspective" (see programme in medical humanities, p. 17).

The expert panel rates quality standard 2.03c as completely fulfilled.

Standard 2.04:

The study programme sets the following educational objectives:

Graduates will

a) have knowledge of the fundamental structures and functional mechanisms of the human body as are relevant to the practice of the profession, from the molecular level to the organism as a whole, in all its developmental phases and covering the entire spectrum from healthy to diseased;

Description and Analysis

In the first year of the BMed, students attend the educational unit "Introduction to systems", where they are taught an integrative vision of biological functions of the human body. This is followed in semester two until four by an in-depth morphological and functional study of the organ systems and pathophysiology, plus system-specific basics of pathology and pharmacology in year three (see study plan of the Bachelor of Medicine, p. 3, 4, 8-16).

The expert panel rates quality standard 2.04a as completely fulfilled.

Standard 2.04b) be able to diagnose and treat common and urgent health problems and diseases that are treated in their professional field;

Description and Analysis

In year three of the BMed, students acquire clinical skills such as techniques of medical interviews, physical examinations, basic technical procedures (suturing, resuscitation, etc.) and clinical reasoning.

In phase one of the MMed “Fundamentals of clinical practice”, students deepen these skills and knowledge in three modules titled “From pathophysiology to disease”, “From symptom to diagnostic” and “The life cycle” before they apply it in the clinical rotations and the elective year, for 3 weeks in an emergency department.

As stated in the self-assessment report, clinical pathology is not yet included in the MMed. The expert panel fully supports the already planned measure: “Introduction of a few hours of clinical pathology in the MMed”.

The expert panel rates quality standard 2.04b as completely fulfilled.

Standard 2.04c) be able to handle medication in a professional, environmentally sound and economical manner;

Description and Analysis

In year three in the BMed, students learn about the system-specific basics of pharmacology.

In the MMed, there are several skills, seminars, lectures and small-group activities dedicated to the following subjects: coma/poisoning, toxicology, pharmacy, pharmacovigilance, travel pharmacy and practical pharmacotherapy.

According to the self-assessment report, pharmacotherapy is taught in a mainly practical way, not by formal teaching. The expert panel fully supports the already planned measure “Assignment of the task to coordinate and supervise the pharmacotherapy teaching to a professor in a clinical speciality. Establishing an inventory of the pharmacotherapy teaching and learning in the MMed, and proposing adjustments where needed.” The expert panel also encourages including environmental aspects of pharmacotherapy such as the production, use, costs and disposals of medications.

The expert panel rates quality standard 2.04c as largely fulfilled.

Standard 2.04d) recognise diseases patterns relevant to related professional fields and adapt their approach to the overriding problems;

Description and Analysis

In module two of phase one of the MMed “From symptom to diagnostic”, students attend five weeks of structured teaching, each dedicated to one of the following subjects:

- Doctor, my joints hurt
- Doctor, I have abdominal pain
- Doctor, I have headache
- Doctor, I am having a fever
- Doctor, I cannot breathe

The expert panel rates quality standard 2.04d as completely fulfilled.

Standard 2.04e) be able to summarise and communicate findings and their interpretation;

Description and Analysis

In the educational unit “Clinical skills and introduction to family medicine” in year three of the BMed, students acquire communicational skills with patients, relatives and health professionals

(see study plan of the Bachelor of Medicine), among others by learning about the medical interview.

In transition two just before the clinical rotations, students learn how to strengthen their communicative skills such as the structured summary of a clinical case and patient-centred communication techniques.

By workplace-based assessments, students' communicative skills are assessed and documented continuously in their e-portfolio.

The expert panel rates quality standard 2.04e as completely fulfilled.

Standard 2.04f) understand health problems holistically and grasp in particular the physical, psychological, social, legal, economic, cultural and environmental factors and impacts, and incorporate these in solving health problems at the individual and community level;

Description and Analysis

In the BMed, students learn about the psychological and social dimension of medicine and disease. In the educational unit "History of medicine" that is part of the programme in medical humanities, students gain a holistic understanding of health and illness from various perspectives, such as social, scientific, historical, cultural and political.

Students learn about legal factors in the lecture "Introduction to healthcare law", about economic factors in the lectures about health management and economics, and about psychological factors in the educational unit "Medical psychology and sociology 1 and 2".

In the educational unit "Community health" in the MMed, students learn about the different dimensions of health and illness such as the social, community, economic, legal and political dimension.

The expert panel rates quality standard 2.04f as completely fulfilled.

Standard 2.04g) understand patients as individuals and within their social environment, and address their concerns as well as those of their relatives;

Description and Analysis

In the BMed, students acquire the competence of applying the acquired knowledge and skills in the clinical context and considering patient-specific attributes (gender, age, social, cultural and economic background) for recognising and explaining clinical signs and symptoms with the aim of diagnostics and treatment (see study plan of the Bachelor in Human Medicine, p. 6).

In the programme of medical humanities, by writing an essay about a patient's medical history from his or her perspective, students are enabled to make a shift in perspectives and understand a patient as an individual and within his or her specific social environment.

In the longitudinal educational unit "Medical psychology and sociology 1 and 2", students have communication skills training.

The expert panel rates quality standard 2.04g as completely fulfilled

Standard 2.04h) show a commitment to human health by providing advice and taking the necessary preventative and health-promoting measures in their professional field;

Description and Analysis

The longitudinal educational unit “Public Health” in the BMed provides students with knowledge about prevention and health promotion.

In the MMed, aspects of prevention such as illness prevention, health promotion, health equity, addiction, stop smoking and motivational interviewing are the subjects of phase one and of focus weeks in phase two.

In the educational unit “Community health”, students learn about public health, population health science, prevention, health promotion and health literacy. With the programmatic assessment (more on this under standard 2.07) and its reflective learning reports that students have to write, they learn about being a health advocate.

The expert panel rates quality standard 2.04h as completely fulfilled.

Standard 2.04i) respect the dignity and autonomy of each person, possess knowledge of ethical reasoning methods, be familiar with the ethical problems in their professional field, and be guided in their professional and scientific activities by ethical principles that serve the common good;

Description and Analysis

In the BMed, there is an extensive programme in medical humanities covering language, culture & medicine, history of medicine, medical ethics and medical anthropology. By attending the lectures and seminars, students gain a comprehension of medical ethics, laws and socio-economic principles in medicine.

The expert panel underlines the importance of the programme in medical humanities and encourages continuing the teaching in medical humanities in the MMed. This could be done in relation to personal experiences with patients.

The expert panel rates quality standard 2.04i as largely fulfilled.

Recommendation 4:

The expert panel recommends continuing the programme in medical humanities in the MMed.

Standard 2.04j) have an appropriate level of knowledge of complementary medicine methods and therapeutic approaches;

Description and Analysis

In the BMed, students attend a course in complementary and integrative medicine that treats the following epistemological and epidemiological aspects:

- Description of the definitions and classifications of complementary medicine
- Issue of the diversity of complementary medicine
- Frequency of use of complementary medicine in the world and in Switzerland
- Reasons why people use complementary medicine
- Principles, effects, dangers of phytotherapy (pharmaceutical products with active substances)

- Basic principles of some complementary medicines (osteopathy, neural therapy, homeopathy, anthroposophical medicine)
- Research in complementary medicine (characteristics of complementary medicine research, the issue of placebo effect)

In the MMed, there are three courses. Firstly, a seminar in complementary and integrative medicine where students evaluate clinical situations that may benefit from complementary medicine treatment in family medicine, paediatrics, gynaecology and geriatrics. Secondly, there is a seminar dedicated to basics of Traditional Chinese Medicine (TCM) where students learn how to assess patients' questions about the benefits and risks of complementary medicine, as well as the basic principles of traditional Chinese medicine and its implication in the clinic. Thirdly, there is also an elective course in complementary medicine.

The expert panel rates quality standard 2.04j as completely fulfilled.

Standard 2.04k) be familiar with the role of the various experts in the primary care setting and know the central importance and function of general practice medicine.

Description and Analysis

In the BMed, there is an introduction to family medicine in year three, where students observe the work of a general practitioner for four days and will be able to carry out some simple procedures themselves.

It is also planned, to introduce a teaching format about family medicine in year two of the BMed and to expand the corresponding activities in year three. The expert panel encourages implementing these measures as soon as possible.

Family medicine is one of the goals set for the MMed by the State Council of Fribourg: “Encouraging the career choice of “family doctor” and, as such, family medicine is one of the eight competency domains of the MMed.

Students have a longitudinal clerkship in family medicine (phase 2 of the MMed), in which they spend in total 15 days in a family medicine or paediatrics practice near Fribourg. These 15 days are spread over one year, so students can discover the practice and follow longitudinally during “all four seasons”.

During the elective year, students have to spend two months in a family medicine or paediatrics practice.

The expert panel encourages continuing with the already implemented teachings and clinical exposures to family medicine and paediatrics in the MMed. From the academic year 2021/ 2022 onwards, students in year one of the BMed will have the opportunity to be in a family medicine or paediatrics practice. The expert panel supports this new measure.

The expert panel rates quality standard 2.04k as largely fulfilled.

Standard 2.05:

The study programme is reviewed regularly to determine how the general objectives of MedPA are being implemented in light of new challenges and conditions in the professional field and how the requirements for the necessary training are being fulfilled.

Description and Analysis

The study programme is accredited every seven years, and while the BMed has been accredited already several times as part of other study programmes in human medicine in

Switzerland (Basel, Bern and Zurich), it is the first time the MMed is part of an accreditation as it is a new programme.

During the interviews, several examples were mentioned as to how the ongoing MMed programme has already been adapted after the first and the second cohort of students started. As an example, the e-Portfolio which is run via Kaizen was adapted to meet the requirements for the documentation of objectives and EPA. Additionally, features to enhance the operability for the students and learning advisors were integrated. Furthermore, the appraisal of the learning reports and other assessments enable regular adjustments based on the experiences from previous years. It is facilitated by the small number of students and the reported great exchange between students and teachers.

The BMed Curriculum Committee and the MMed Curriculum Committee each regularly review the BMed and the MMed, respectively, regarding new challenges and conditions in the professional field as well as the fulfilment of the requirements for the necessary training.

There are regular meetings of the rectorate, the dean and the administrative staff of each faculty. The faculties are responsible for the teaching, but the rules and regulations as well as the appointment of professors has to be approved by the rectorate.

The expert panel rates quality standard 2.05 as completely fulfilled.

Standard 2.06:

It is documented that all applicable regulations in Switzerland for the professional qualifications of graduates are taken into consideration in the study programme.

Description and Analysis

The BMed and the MMed take into consideration the regulations formulated in the MedPA and its Directive. The curriculum of the BMed is based on SCLO and will be adapted to PROFILES in the near future. The curriculum of the MMed is entirely based on PROFILES.

The expert panel rates quality standard 2.06 as completely fulfilled and refers to recommendation 1.

Standard 2.07:

The methods of assessing the performance of students is adapted to the learning objectives.

Description and Analysis

In the BMed, there are three examination sessions per year, in winter, in summer, and in autumn. Only the assessment of the clinical skills in year three of BMed is assessed once a year in the summer. Students have to register to take the exams. Educational units are grouped and assessed in so-called validation packages in the same examination session. Students have to acquire 60 ECTS to be able to continue their studies in the following year (see study plan of the Bachelor in Human Medicine, p. 7).

The assessment methods are the following:

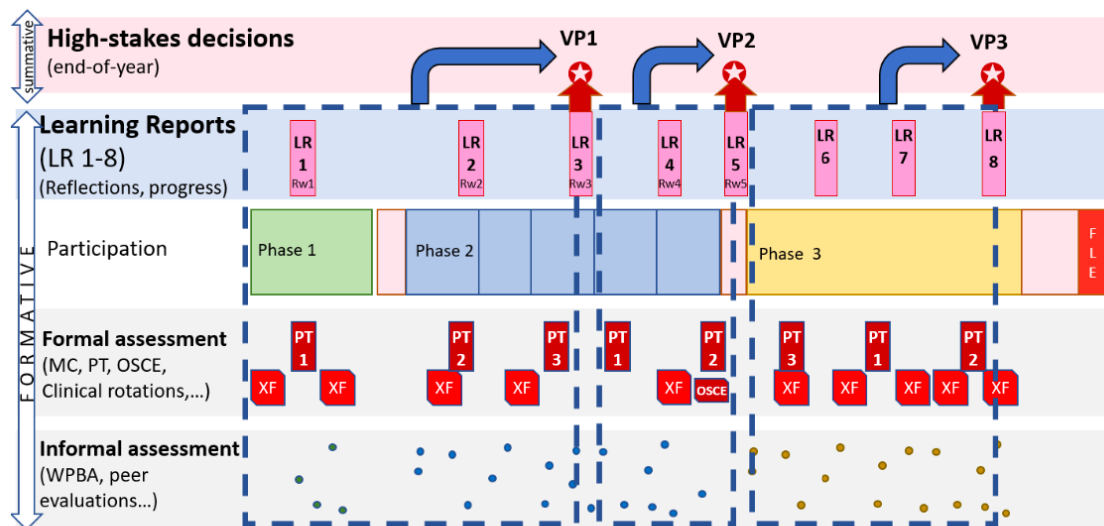
- objective structured clinical examination (OSCE),
- multiple choice questions (MCQ),
- objective structured practical examination (OSPE),
- oral exam,
- essay,

- practical exam.

When students have taken an exam, they receive their grade and sub-scores for the subdivisions of the different parts of the exam. If they want to see their answers given in the exam, students have to pay a fee. The experts encourage granting free access to exam results for all students, so that they are able to obtain a feed forward to learn from the measured performance and already adopt this reflective culture, which is already practiced in the framework of programmatic assessment in the MMed. The expert panel makes a recommendation.

As for the teachers, it was reported in the interviews that they do not receive feedback on how students performed in the corresponding parts of the exam which is usually done on the module level. As each teacher is only responsible for his or her discipline and contributes to various exams, quality assurance measures should be attributed to disciplines and parts of the modules. The experts suggest that it would be valuable and important for the teaching staff to reflect on students' performance and on the statistical analysis of the exam as well its items which are directly linked to the teaching responsibility. The expert panel makes a recommendation.

In the MMed, a system of programmatic assessment is implemented. Milestones were defined to determine the level that is to be acquired in each competence. In order for the students to have meaningful feedback, formal and informal formative assessment is implemented throughout the MMed. And "to ensure the use of the feedback", there are no grades. However, there are scores for quantitative results, but narrative feedback is clearly favoured. Every student has a personal learning advisor that accompanies him or her throughout their Master studies. Also, every student has his or her own e-Portfolio to collect all relevant data. Only the student and his or her learning advisor have access to the e-Portfolio. There is an "end-of-year summative high-stakes decision" during the MMed and students either pass, fail or get promoted with reservation. Students have to pass this decision to enter the next year of study. This is implemented as follows:



Legend:

LR = Learning Report	Rw = reflection week
MC = multiple choice exam	VP = Validation package
PT = Progress Test	WPBA = Workplace-based assessments
OSCE = Objective Structured Clinical Exam	XF = Formal mandatory exams (Module Test, Thematic Test)

The assessment methods used are written learning reports that students have to write, multiple choice exams, progress tests, objective structured clinical exam (OSCE) and workplace-based assessments (WPBA). Students have time during their reflection week to write their learning reports. After a written exam, students receive their answers and the solution to each of the questions so they can relate their performance to the expectations.

The yearly learning reports that students have to write and that represent the “end-of-year summative high-stakes decision” are evaluated by a student progress committee, the ComPAE (Commission de Progression de l’Apprentissage des Étudiants), with the help of the Med-Exam Team. The ComPAE evaluates the reports compared to the milestones and then decides the student has passed or failed or passed with reservation.

Each learning advisor is responsible for four different students. He or she meets at least three times per year with each student during the reflection weeks and has access to his or her e-Portfolio. A learning advisor teaches in the MMed, is a senior physician or a resident doctor and participates at a training to become a learning advisor.

With this system, the MMed aims at preparing the students not only for the Federal Licensing Exam but for their first year in residency. The workload for giving feedback for the teachers is considerable so the system is adapted continuously. However, teachers do not have to work on questions for summative multiple choice exams in the MMed. According to statements from the interviews, teachers perceive giving formative assessment as more satisfying. The students feel well prepared for the Federal Licensing Exam.

In the opinion of the expert panel, this assessment system is very innovative and suits the competency-based concept of PROFILES very well. It is therefore a very good fit for the MMed. Of course, it is to be seen how the first cohort of students will perform in the Federal Licensing Exam.

In the interviews, it is reported that sometimes there are issues with the translations of exam questions. The expert panel refers to standard 3.02.

The expert panel rates quality standard 2.07 as largely fulfilled.

Recommendation 5:

The expert panel recommends granting students free access to their exam results in the whole study programme.

Recommendation 6:

The expert panel recommends giving teachers feedback on the performance of students and statistical parameters of their questions in each subdiscipline of an exam.

Standard 2.08:

The admission requirements and requirements for earning a qualification are regulated and published.

Description and Analysis

Admission requirements for the BMed are regulated by the Canton of Fribourg and by the University of Fribourg. Applications to study in the BMed have to be submitted to swissuniversities. Swissuniversities organises the aptitude tests that all students who want to study human medicine at either the Universities of Basel, Bern, Fribourg, Zurich (including the “Luzerner Track” and “St. Galler Track”), the ETH Zurich or the Università della Svizzera italiana have to pass. When applying, future students have to name their preferences where they want to study human medicine. Depending on their score, they are either rejected or given a place in

one of the study programmes. The higher they score, the more likely they will be assigned to the preferred university.

After successfully completing the BMed in Fribourg, students can choose if they want to continue their studies in Basel, Bern, Fribourg or Zurich. The university of Fribourg has agreements with each of these universities to accept BMed graduates from Fribourg, detailing the number of students.

The expert panel rates quality standard 2.08 as completely fulfilled.

3. area: Implementation

Standard 3.01:
The study programme is offered regularly.

Description and Analysis

Since 2009, the BMed, and since 2019, both the BMed and the MMed, are offered regularly. It is possible to begin in the autumn semester, provided that the admission requirements are met.

The expert panel rates quality standard 3.01 as completely fulfilled.

Standard 3.02:
The available resources (supervision and material resources) enable students to attain their learning objectives. The higher education institution describes how the number of students is determined in all phases of the curriculum and to what extent it is adjusted to meet the capacity of the training institution.

Description and Analysis

Supervision

The University of Fribourg is responsible for providing the resources for the study programme. According to the “Convention of objectives” and the service agreement with the faculty, the rectorate gives the faculty the defined means to meet the requirements stated in the convention every year. This includes operating and equipment credit. In the Faculty and in the Section, there are Finance Committees responsible for the distribution of the means, according to predefined keys. Until the end of 2022 though, funding for the MMed stems directly from the rectorate. Afterwards, it will change to the usual system presented above. For teaching in the basic biomedical sciences not provided by teachers from the university and for clinical teaching, the university provides additional funding.

Clinical teaching is provided by staff of HFR and the RFSM. With both institutions, the University of Fribourg has a service agreement. The family physicians and general practitioners who supervise students are remunerated according to their private service contract concluded with the Institute for Family Medicine. General practitioners have to do a mandatory course titled “Teacher in the general practice” before working with students.

The Section of Medicine has 28 full professors (22 full-time equivalent FTE), of which twelve (seven FTE) were nominated for the newly established MMed. Four positions (two FTE) are still to be filled. In addition, the Section has 118 teaching and research academic associates and 76 assistants or PhD candidates. Some teachers of the Section of Science also participate in the teaching of the BMed. For the administration of the BMed, the MMed, the Bachelor Programme in Biomedical Sciences and the Master Programme in Experimental Biomedical Research, the Section has 9.1 FTE in administrative and technical staff. To run the five teaching platforms, there are 16.3 FTE.

In the MMed, each student is assigned a personal learning advisor who is a senior physician or a resident doctor teaching in the MMed and who will accompany and coach the student throughout the MMed. They meet at least three times per year in the reflection weeks. Only the student and his or her learning advisor have access to the student's e-Portfolio. Students appreciate having a learning advisor. For some learning advisors, the workload has been too much, so adjustments had to be made. Each learning advisor is trained for the task and is responsible for four students at the same time.

However, all staff appreciate the close contact with students and the possibilities of informal exchange in addition to the formal structured exchanges determined by the curriculum. This allows them to adapt the programme quickly if needed, which they do.

There is general counselling provided by the University of Fribourg for all its students and then there is specific counselling only for students of the BMed and the MMed. For each BMed and MMed, there is a curriculum manager who acts as student advisor.

Material resources

Teaching and research of the Section take place in several sites. The three main sites are firstly the site of Pérolles, secondly the site Arsenaux and thirdly the site "Med 16" and "Pavillon B3" on the site of the HFR.

In the site of Pérolles, there is the library of the Faculty of Science and Medicine.

According to the self-assessment report, additional space is needed urgently for teaching, for research and for administration of the Section. This will be further considered and discussed in the ongoing institutional accreditation of the University of Fribourg. The expert panel takes note and supports the Section in its need for space to create a suitable, coordinated and nearby environment for learning, teaching, research and its administration.

Regarding IT, there is on the one hand the general infrastructure provided by the University of Fribourg for all its students and employees. Additionally, there is the Med-IT for special services and the exams on the platform UCAN that only the Section for Medicine needs for the running of its study programme.

The pandemic and the quick change to online teaching due to the lockdown in Spring 2020 was a challenge for the IT-infrastructure. However, the challenge was met so that online teaching took place and, except for only a short period of time, it was also always possible to conduct bedside teaching.

The administrative staff of the study programme is distributed among the different buildings where teaching and research for the MMed takes place. The expert panel suggests considering how the collaboration between administrative staff could be facilitated.

As stated in the self-assessment report and in the interviews during the on-site visit, translation of exams and teaching material consumes a lot of resources and could be improved. In particular, the administrative staff seeks support to fulfil all deadlines within the parallel layout in two languages. Of note, it is important that the translations are correct from the subject point of view. In order to do so, the expert panel recommends providing additional resources for the bilingual outset of the study programme.

Number of students

In the BMed, 125 students begin their studies every year in autumn. The goal is to have 120 successful BMed graduates after three years of study. Having completed the BMed, 80 students

leave Fribourg in order to continue their studies at master's level either at University of Basel, Bern or Zurich.

Since 2019, 40 students begin their studies in the MMed every autumn. In order to determine the number of places available in the new MMed, a feasibility study was carried out in 2014. The study analysed the available resources for the MMed in the HFR, in the RFSM and in the general practitioner's offices nearby. The hospital in Fribourg is not a university hospital.

The expert panel rates quality standard 3.02 as completely fulfilled.

Recommendation 7:

The expert panel recommends providing additional resources for the bilingual outset of the study programme.

Standard 3.03:

The teaching staff possesses the competencies appropriate to the special features of the study programme and its objectives.

Description and Analysis

The teaching is partly provided by teaching staff of the university and partly by external casual teachers. Clinical teaching is provided by staff of HFR and the RFSM. With both institutions, the University of Fribourg has a service agreement. The family physicians and general practitioners who supervise students are remunerated according to their private service contract concluded with the Institute for Family Medicine.

Appointment of professors is carried out according to the rules of the University of Fribourg stated in Article 20-24 of the University Statutes and Article 3-23 of the Regulation concerning professors. In the process, the "Structure Committee" and the "Nomination Committee" are central actors. The minimum requirements, including scientific and didactic skills, are defined in Article 20-21 of the University Statutes. The expert panel recommends defining teaching requirements for the respective position in more detail. Thus, in the appointment of new staff, teaching tasks can be emphasised as an important aspect of the recruited person.

The university created academic titles to reward clinicians for their teaching and research, such as the "professeur-e ordinaire Clinique"/ "klinischer ordentlicher Professor oder klinische ordentliche Professorin", "professeur-e titulaire clinique"/ "Klinischer Titularprofessor oder Klinische Titularprofessorin", "maître ou maîtresse d'enseignement clinique"/ "Klinischer Dozent oder Klinische Dozentin" or the "chargé-e d'enseignement Clinique"/ "Klinischer Lehrbeauftragter oder Klinische Lehrbeauftragte" (see Article 30a and b, University Statutes). After completion of some specific training in Medical Education, the title "Master of Clinical Education" can also be obtained.

Postgraduate training for the residents and mandatory continuous education for senior physicians ensure the medical competencies of teaching staff (see Article 40 MedPA).

The Medical Education Unit (Unité de pédagogie médicale) at the Department of Community Health offers workshops and training courses in medical education, such as "Basic course: general principles of medical education", "Teacher in the classroom", "Giving a feedback", "Skills trainer", "EPA: just do it", "Teacher in the general practice" or "Learning advisor". According to statements from the interviews at the on-site visit and the self-assessment report, some teachers have attended courses at the Medical Education Unit.

Furthermore, the University of Fribourg pays the tuition fees for members of the teaching staff who want to do a CAS in Medical Education at the University of Geneva.

In the view of the expert panel, the Medical Education Unit presents an excellent opportunity to strengthen faculty development and for all members of the teaching staff to expand their knowledge and skills in medical education. The expert panel recommends that all teaching staff attend a minimum of obligatory courses that also include digital and innovative didactic tools and strategies to enhance their teaching competencies and their didactic qualification even further.

The expert panel rates quality standard 3.03 as largely fulfilled.

Recommendation 8:

The expert panel recommends defining teaching requirements for positions in more detail.

Recommendation 9:

The expert panel recommends providing obligatory didactic courses for all teaching staff involved in the BMed and MMed.

Standard 3.04:

The training institution pursues a long-term policy to promote young talent, which includes continuing education and training, development and assessment of the teaching staff. The criteria applied here takes into consideration research performance as well as teaching qualifications.

Description and Analysis

At the University of Fribourg, the faculties are responsible for the promotion of academic young talent and contribute to continuous education at university level.

The Section of Medicine as part of the Faculty of Science and Medicine has 118 teaching and research academic associates and 76 assistants or PhD candidates. In addition to the measures and offers cited in standard 3.03, each research group and teaching platform has some positions available for the education and training of young academics in teaching and research that are funded by the university. Furthermore, the section provides financial support for visiting domain-related research conferences and workshops.

With respect to the development of didactic and general skills contributing to the profile of an academic, members of the section staff can attend workshops and courses at the Centre for University Didactics, at the Centre of New Technologies and Teaching and the Direction of IT-Services, at the Research Promotion Service or at the Language Centre.

Furthermore, members of the University of Fribourg can also attend workshops for university teachers by the RCFE (Réseau romand de conseil, formation et évaluation), the REGARD workshops for young female academics or workshops for the development of transversal competences of the CUSO (Conférence universitaire de Suisse occidentale) (for doctoral students).

The expert panel supports and encourages these offers to promote young talent and stresses the importance of measure 13 of the action plan: "Implementation of a mentoring programme allowing young teachers to be assisted by a mentor to improve their skills and better plan their career."

The expert panel rates quality standard 3.04 as largely fulfilled.

4. area: Quality assurance

Standard 4.01:

Managing the study programme takes into consideration the interests of the relevant interest groups and makes it possible to achieve the necessary developments.

Description and Analysis

There are regular meetings of the rectorate, the dean and the administrative staff of each faculty. The faculties are responsible for the teaching, but the rules and regulations as well as the appointment of professors has to be approved by the rectorate.

The two curriculum committees, the BMed Curriculum Committee and the MMed Curriculum Committee, are responsible for managing the study programme and ensuring its quality. Members of the committees are the curriculum manager, representatives of the academic teaching staff, of the partner institutions, of the students as well as the head of the other Curriculum Committee. It is possible to invite more people to the committee to talk about specific topics.

In the Faculty as well as in the Section Council, students, the HFR and the RFSM are represented.

Family medicine is represented in the Section Council as well as in the MMed Curriculum Committee.

Through different evaluation formats, the courses in the whole study programme are evaluated and improved regularly (more on this under standard 4.02).

The curriculum manager of the MMed meets regularly with the learning advisors to talk about their tasks and to get feedback about the experiences.

Furthermore, the expert panel recommends improving and coordinating the exchange between the administrative and (clinical) teaching staff. This could be done by implementing or using an organisational management tool to provide the teaching material, among others, and displaying an overview for the clinical teaching staff where time and place of each and everyone's courses are noted. Aiming to further improve the concept of blended learning, the teaching staff should be equipped with direct access to the learning platform so that they can create "online modules" with means of interaction and feedback to students rather than just uploading files.

For the transparency of objectives within the course of the curriculum, a mapping strategy enabled by a multi-user platform should be considered. This procedure for reviewing the operational *curriculum* is entered into an electronic database at any education setting and defined milestones. By doing so, students and teaching staff will receive a transparent overview of the curriculum to help improve and harmonise their teaching activities.

The expert panel rates quality standard 4.01 as largely fulfilled.

Recommendation 10:

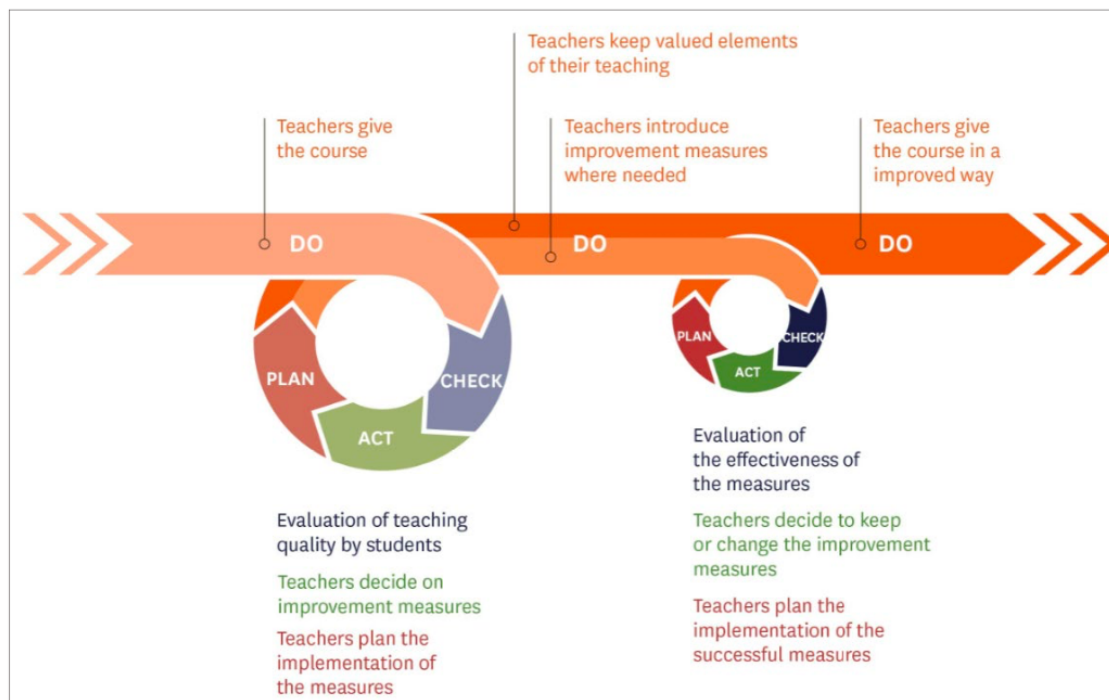
The expert panel recommends improving and coordinating the exchange between the administrative and teaching staff. The autonomy of teaching staff should be promoted to deliver materials for blended learning. A mapping of objectives would be helpful to create a transparent overview of the content and course of the curriculum.

Standard 4.02:

The study programme is an integral component of the quality assurance system of the higher education institution or other institution within the higher education sector.

Description and Analysis

The University of Fribourg has defined its quality assurance strategy with guidelines and goals. According to these regulations, quality assurance is implemented in the faculties and in the Section of Medicine. Regarding the teaching, the quality assurance cycle is designed and implemented according to the “Regulation on Quality Assurance and development of teaching and studies at the Unifr” and the “Guidelines for Quality assurance in teaching” as follows:



Teaching evaluations in the BMed and in the MMed use different evaluation forms than the rest of the University of Fribourg, and are carried out according to a different schedule.

In the BMed, there are evaluations of the educational units and the teaching skills of the teachers. The evaluation takes place online with specific evaluation forms. After evaluation, all educational units of the BMed in 2015 and 2018/ 2019, evaluation is currently carried out in a “targeted manner”. Nonetheless, some educational units such as medical humanities and clinical skills are evaluated regularly.

The academic administrator responsible for the educational unit and the teacher receive the results of the evaluations. At the end of the semester, the curriculum manager as well as the chair of the BMed Curriculum Committee also receive them. If needed, the chair of the Curriculum Committee will talk to the responsible academic administrator to find a solution to the problem(s) presented in the results of the evaluation.

In the MMed, students evaluate each teaching period online with a specific form. The person responsible for the corresponding teaching period and the curriculum manager receive the results. At the end of each module, the curriculum manager, the module’s leader, the teachers involved as well as three delegated students talk about the results of the evaluation in a meeting. They also decide on measurements that need to be taken, or not.

Regarding clinical rotations, the person responsible for the clinical rotations' programme and the person responsible for the individual rotation discuss the corresponding results.

Longitudinal elements of the MMed are also evaluated at the end of year one and year two with an online form.

The yearly learning reports that students have to write and that are evaluated by the ComPAE also serve to improve the quality of the curriculum of the MMed. From autumn 2021 onwards, the ComPAE will write a yearly report for the attention of the MMed Curriculum Committee with their findings regarding the quality assurance of the curriculum.

The expert panel rates quality standard 4.02 as completely fulfilled.

Standard 4.03:

The training institution reviews regularly the results of the students (including the federal examination) and documents the consequent implications for the study programme.

Description and Analysis

As the first cohort will take the Federal Licensing Exam only in 2022, there are no results just yet.

Regarding the results of the students throughout their studies, the ComPAE makes a yearly extensive evaluation of all learning reports in the MMed. Based on this, it will make a report and forward it to the MMed Curriculum Committee from 2021 onwards.

In the BMed, the Med-Exam team makes a report after every exam session and forwards it to the Examination Committee and the BMed Curriculum Committee. The results of the practical exams are analysed by the responsible academic administrator for the educational unit.

The expert panel rates quality standard 4.03 as completely fulfilled.

3 Overall appraisal and strengths/weaknesses profile of the study programme

The expert panel considers the BMed as established well and fulfilling the requirements for an excellent preparation for various master's programmes, such as in Fribourg and beyond.

In the MMed, the competency-based approach and the corresponding laudable assessment methods are highly innovative and future-oriented. The curriculum includes the basic foundation in clinical medicine as well as emerging topics such as interprofessional collaboration and communication, human resources and family medicine. The most outstanding didactic element is determined by the continuous reflection process that is linked to the regular learning reports of the master's students within the framework of programmatic assessment. The expert panel understood that there is also a great benefit for the perception of the new master's curriculum as experienced by the learning advisors. The expert panel encourages the study programme to keep on following this didactic track to develop the soft skills of students as well as staff and enjoy the associated change in teaching culture.

Furthermore, there is a sophisticated framework of learning objectives based on PROFILES as well as the seven goals of the State Council of Fribourg which overarch the didactic concept of teaching and learning. The expert panel is fully aware that the MMed has to be still considered as work in progress.

Based on the recommendations from the last accreditation process, the organisation and structure within the Faculty and the Section of Medicine have grown and improved respectively.

Quality assurance measures are in place and the action plan for further development of the study programme is outlined with many specific examples in the self-assessment report.

At the same time, the expert panel addresses some recommendations which could help to further develop and improve the curricula and the underlying administrative structure, namely investing in early exposure to patients, starting from year one in the BMed; reinforcing the PROFILES-guided linking of basic sciences and biomedical sciences with the clinical context, by identifying and formulating specific learning objectives; improving the transparency of competencies and learning objectives for students and staff wherever they stand in the course of the curricula by using a mapping strategy; improving the communication of exam results to bachelor's students so that they are able to obtain a feed forward to learn from the measured performance; strengthening faculty development, such as the didactic qualification of all teaching staff, for example by considering an obligatory didactic training as an elementary course with focus on methods especially suited in medicine and digital teaching competence; and lastly considering a digital course management platform to ease planning and enable flexibility for the clinical and administrative staff as well as for students.

4 Recommendations for development of the study programme

Recommendation 1:

The expert panel recommends implementing the framework of PROFILES in the whole study programme.

Recommendation 2:

The expert panel recommends implementing some time dedicated exclusively to the master thesis in the curriculum of the MMed.

Recommendation 3:

The expert panel recommends further developing topics of environmental health in the whole curriculum and medical ethics in the MMed.

Recommendation 4:

The expert panel recommends continuing the programme in medical humanities in the MMed.

Recommendation 5:

The expert panel recommends granting students free access to their exam results in the whole study programme.

Recommendation 6:

The expert panel recommends giving teachers feedback on the performance of students and statistical parameters of their questions in each subdiscipline of an exam.

Recommendation 7:

The expert panel recommends providing additional resources for the bilingual outset of the study programme.

Recommendation 8:

The expert panel recommends defining teaching requirements for positions in more detail.

Recommendation 9:

The expert panel recommends providing obligatory didactic education courses for all teaching staff involved in the BMed and MMed.

Recommendation 10:

The expert panel recommends improving and coordinating the exchange between the administrative and teaching staff. The autonomy of teaching staff should be promoted to deliver materials for blended learning. A mapping of objectives would be helpful to create a transparent overview of the content and course of the curriculum.

5 Accreditation proposal of the expert panel

On the basis of the self-assessment report of the study programme in human medicine at the University of Fribourg dated 3 May 2021 and the on-site visit of 23 June and 24 June 2021, the expert panel proposes that a formal pronouncement should be made to grant accreditation of the study programme in human medicine of the University of Fribourg unconditionally.



Part D

Statement of the Section of Medicine of the Faculty of Science and Medicine of the University of Fribourg

28 September 2021



Fribourg, 27.09.2021

Statement of the Section of Medicine, Faculty of Science and Medicine, University of Fribourg on the external evaluation report

We would like to thank the AAQ for leading the accreditation procedure and for the external evaluation report submitted on August 23, 2021.

We thank the expert group for the constructive, fair and objective appreciation of our study programme – the Bachelor of medicine (hereinafter BMed) and the Master of medicine (hereinafter MMed). The on-site visit was extremely positive for us, as there were constructive and stimulating discussions between the expert group and representatives of the university and the study programme. The external review, as well as our self-assessment, will certainly contribute to further development of our study programme.

We welcome the proposal for an accreditation without condition and we value the ten recommendations made by the expert panel. Hereafter, we comment on each of those recommendations.

Quality standard	Experts' recommendations	Our statement
1.01	Recommendation 1: The expert panel recommends implementing the framework of PROFILES in the whole study programme.	We thank the expert panel for emphasising the implementation of the framework of PROFILES, especially in the BMed. According to measure 1 of our action plan, the BMed Curriculum Committee is in charge of implementing this recommendation until 2027. The implementation of PROFILES in the MMed will be further developed.
2.02 b)	Recommendation 2: The expert panel recommends implementing some time dedicated exclusively to the master thesis in the curriculum of the MMed.	Recommendation 2 is much appreciated as its implementation will substantially improve the workload of the Master students. The MMed Curriculum Committee will ensure that this recommendation will be implemented within the next two years (measure 5).
2.03 b)	Recommendation 3: The expert panel recommends further developing topics of environmental health in the whole curriculum and medical ethics in the MMed.	We value that the expert panel stresses the development of these innovative and sensitive domains. Environmental science has become a key domain in the Faculty. Therefore, with the support of the Faculty, the BMed and MMed Committees will establish a joint working group to elaborate a concept and a programme in environmental health. The topic of medical ethics in the MMed is in progress (measure 8).
2.04 i)	Recommendation 4: The expert panel recommends continuing the programme in medical humanities in the MMed.	We appreciate this recommendation to enrich the MMed in this domain. The MMed Curriculum Committee will establish a working group for its implementation.

2.07	Recommendation 5: The expert panel recommends granting students free access to their exam results in the whole study programme.	This recommendation is essential for the students to learn from their exams. This topic requires important changes of the corresponding complex regulations. As this recommendation concerns mainly the BMed, the Section will establish a BMed working group for the adjustments aiming to enable free access to exams results to the students in the whole study programme. The outcome of the BMed working group will then be considered for the MMed, if appropriate.
2.07	Recommendation 6: The expert panel recommends giving teachers feedback on the performance of students and statistical parameters of their questions in each subdiscipline of an exam.	Our exam item management system (UCAN) grants internal teachers access to the statistical parameters of their questions. The Examination Committee will improve the procedure for providing 1) feedback on the psychometric performance of questions to other teachers who do not access UCAN, 2) counselling on exam question writing.
3.02	Recommendation 7: The expert panel recommends providing additional resources for the bilingual outset of the study programme.	We welcome the recommendation to increase the resources to better support the bilingual outset of the programme. The Section will engage in discussions to include this in the next multi-year planning.
3.03	Recommendation 8: The expert panel recommends defining teaching requirements for positions in more detail.	This recommendation will help to improve the recruitment process of teachers. The Section Council will establish an ad hoc committee for defining and implementing teaching requirements for positions in more detail.
3.03	Recommendation 9: The expert panel recommends providing obligatory didactic education courses for all teaching staff involved in the BMed and MMed.	This recommendation will help to improve the teaching quality of teachers. The UPM will extend its faculty development programme to include specific needs of the BMed and digital competencies. The question of obligation will be addressed by the ad hoc committee of Recommendation 8.
4.01	Recommendation 10: The expert panel recommends improving and coordinating the exchange between the administrative and teaching staff. The autonomy of teaching staff should be promoted to deliver materials for blended learning. A mapping of objectives would be helpful to create a transparent overview of the content and course of the curriculum.	We acknowledge the contents of this recommendation and the need for improvement. The Med-Office with the Curriculum managers, under the guidance of the Chairs of the Curriculum Committees, will analyse this recommendation. The mapping of objectives is in progress (measure 2); there is an opportunity to extend it in the BMed.

Validated by the Faculty Council on 27 September 2021

Prof. Gregor Rainer



Dean of the Faculty of Science and
Medicine of the University of Fribourg

Prof. Raphaël Bonvin



Lead of accreditation, Vice-chairman
of the Section of Medicine



Part E

Hearing of the Commission for Medical Professions

11 November 2021



Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
Confederaziun svizra

Eidgenössisches Departement des Innern EDI
Medizinalberufekommission MEBEKO
Ressort Ausbildung

CH-3003 Bern, BAG **A-Priority**

Schweizerische Agentur für Akkreditierung
und Qualitätssicherung (aaq)
Effingerstrasse 15
Postfach
3001 Bern

Referenz/Aktenzeichen:
Ihr Zeichen:
Unser Zeichen: HMA/REB
Bern, 11. November 2021

Akkreditierung des Studienganges Humanmedizin an der Mathematisch-Naturwissenschaftlichen und Medizinischen Fakultät (Abteilung Medizin) der Universität Freiburg

Sehr geehrte Damen und Herren

Im Namen der Medizinalberufekommission (MEBEKO), Ressort Ausbildung, wird wie folgt Stellung genommen:

1. Rechtsgrundlagen der Akkreditierung:
 - Nach Artikel 12 Absatz 1 Buchstabe b des Bundesgesetzes über die universitären Medizinalberufe (Medizinalberufegesetz, MedBG, SR 811.11) erhalten namentlich diejenigen Personen Zutritt zur eidgenössischen Prüfung einer der universitären Medizinalberufe, die einen nach dem MedBG akkreditierten Studiengang absolviert haben.
 - Die Artikel 23 und 24 MedBG regeln die Akkreditierungspflicht und die Akkreditierungskriterien. Die Studiengänge müssen nach den Anforderungen des Hochschulförderungs- und Koordinationsgesetz (HFKG, SR 414.20) und des MedBG akkreditiert sein. Die anzuwendenden Qualitätsstandards sind entsprechend eine Kombination der Anforderungen dieser beiden gesetzlichen Grundlagen. Das Verfahren richtet sich nach Artikel 32 HFKG. Nach Artikel 19 der Verordnung des Hochschulrates über die Akkreditierung im Hochschulbereich (Akkreditierungsverordnung HFKG, SR 414.205.3) gilt die Akkreditierung für sieben Jahre ab Akkreditierungsentscheid.
2. Aufgaben und Vorgehen der MEBEKO, Ressort Ausbildung, im Akkreditierungsprozess:
 - Nach Artikel 50 Absatz 1 MedBG kommen der MEBEKO im Bereich der Akkreditierung zwei Aufgaben zu. Sie berät verschiedene Gremien (darunter auch das Akkreditierungsorgan) in Fragen der Aus- und Weiterbildung (Buchstabe a). Die MEBEKO nimmt zudem Stellung zu Akkreditierungsanträgen im Bereich der Aus- und Weiterbildung (Buchstabe b). Das Ressort

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Ausbildung der MEBEKO ist für die Akkreditierungsverfahren betreffend Ausbildungsgänge, das Ressort Weiterbildung der MEBEKO ist für diejenigen hinsichtlich Weiterbildungsgänge zuständig. Die Stellungnahme der MEBEKO, Ressort Ausbildung erfolgt nach Erhalt des Berichtsentwurfs des Akkreditierungsorgans, welcher auf der Beurteilung der Selbst- und Fremdevaluation beruht.

- Jeweils zwei Mitglieder der MEBEKO, Ressort Ausbildung, bereiten gestützt auf sämtliche Dokumente der Selbst- und Fremdevaluation (inklusive Expertenvisitation) sowie des Berichtsentwurfs des Akkreditierungsorgans die Diskussionen der Kommission vor. Sie berichten der Kommission schriftlich und mündlich und schlagen ihr eine Stellungnahme vor.
3. Die MEBEKO, Ressort Ausbildung, stellt fest, dass das Akkreditierungsverfahren des Studienganges Humanmedizin an der Mathematisch-Naturwissenschaftlichen und Medizinischen Fakultät (Abteilung Medizin) der Universität Freiburg korrekt nach den geltenden Rechtsgrundlagen und Standards durchgeführt worden ist. Die von den Experten ausgesprochenen Empfehlungen werden von der MEBEKO ebenfalls unterstützt.
4. Stellungnahme der MEBEKO, Ressort Ausbildung, bezüglich Akkreditierung des Studienganges Humanmedizin an der Mathematisch-Naturwissenschaftlichen und Medizinischen Fakultät (Abteilung Medizin) der Universität Freiburg:
- Der Selbstevaluationsbericht und der Expertenbericht aaq werden zustimmend zur Kenntnis genommen.
 - Die Beurteilung des Studienganges durch die Experten ist korrekt und empfiehlt eine Akkreditierung ohne Auflagen.
 - Die MEBEKO unterstützt die Empfehlung der Experten, den Studiengang Humanmedizin an der Universität Freiburg ohne Auflagen zu akkreditieren.

Freundliche Grüsse

Medizinalberufekommission
Ressort Ausbildung
Die Leiterin

A handwritten signature in blue ink, appearing to be 'N. Koch'.

Frau Dr.med. Nathalie Koch

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